

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Aetna Inc. Political Action Committee

ADDRESS (number and street)

20 F Street, N.W.

Suite 350

Washington

DC

20001



Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 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 Year-End 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the State of

DC

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Chambers, Glen, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Chambers, Glen, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Aetna Inc. Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 18 / 2018 To: M M / D D / Y Y Y Y Y 11 / 26 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2018		292567.90
(b) Cash on Hand at Beginning of Reporting Period.....	66384.09	
(c) Total Receipts (from Line 19) .....	93932.28	567388.47
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	160316.37	859956.37
7. Total Disbursements (from Line 31).....	90750.04	790390.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	69566.33	69566.33
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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. 05/2016)

Page 3

Write or Type Committee Name

**Aetna Inc. Political Action Committee**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	1	8

<b>I. Receipts</b>	<b>COLUMN A</b> <b>Total This Period</b>	<b>COLUMN B</b> <b>Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	86335.38	456697.08
(ii) Unitemized .....	7596.90	95691.39
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	93932.28	552388.47
(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) .....	93932.28	552388.47
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 Transfers (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)) .....	93932.28	567388.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	93932.28	567388.47

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	92500.00	655500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	890.00
(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	890.00
29. Other Disbursements (Including Non-Federal Donations).....	- 1749.96	134000.04
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	90750.04	790390.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	90750.04	790390.04

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	93932.28	552388.47
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	890.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	93932.28	551498.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: F3XN  
Transaction ID :

Footnote to Schedule B, Line 29, Page 1, Item C: Russell R. Dickhart, 509 Maplewood Road, Wayne, PA 19087-4718; 01/08/2015: \$0.04; Purpose: Disgorged Contribution: Uncashed Refund Check.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

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

A. Abbosh, Michelle, , ,

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Project Program Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-586

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Abbosh, Michelle, , ,

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Project Program Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 2018111910297-580

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Abetti, Dana, S, ,

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Proj Program Sr Mgr

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

458.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-473

Amount of Each Receipt this Period

41.66

☐ Memo Item

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:  
(check only one)

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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**

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

**A. Abetti, Dana, S, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-467**

Amount of Each Receipt this Period

41.66

☐ Memo Item

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

**B. Abrams, Michele, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-152**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Abrams, Michele, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-149**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

91.66



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

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

FOR LINE NUMBER: PAGE 9 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Adkins, Sheryl, B, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

SVP, Commercial Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-255**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**B. Adkins, Sheryl, B, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

SVP, Commercial Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-251**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**C. Agrawal, Hemant, , ,**

Mailing Address 88 Morgan St  
Unit PH2-3

City  
Jersey City

State  
NJ

Zip Code  
07302-1427

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Financial Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-340**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

883.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 258

(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**

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

**A. Agrawal, Hemant, , ,**Mailing Address 88 Morgan St  
Unit PH2-3City  
Jersey CityState  
NJZip Code  
07302-1427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Financial Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-335**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Akinwande, Kenneth, A, ,**

Mailing Address 2631 Sir Castor Ct

City  
LewisvilleState  
TXZip Code  
75056-5649FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
App Softwr Delivery Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-494**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Akinwande, Kenneth, A, ,**

Mailing Address 2631 Sir Castor Ct

City  
LewisvilleState  
TXZip Code  
75056-5649FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
App Softwr Delivery Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-488**

Amount of Each Receipt this Period

50.00

☐ Memo Item**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)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Alim-Marvasti, Fariba, , ,**

Mailing Address 47 Partridge Lndg

City  
Glastonbury

State  
CT

Zip Code  
06033-2848

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, IT Prog Delvry

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-187**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Alim-Marvasti, Fariba, , ,**

Mailing Address 47 Partridge Lndg

City  
Glastonbury

State  
CT

Zip Code  
06033-2848

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, IT Prog Delvry

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-183**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Alkhalaf, Jill, M, ,**

Mailing Address 1841 Newburyport Rd

City  
Chesterfield

State  
MO

Zip Code  
63005-4727

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Mgr, Clinical Health Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-423**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

103.34

**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:  
(check only one)

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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**

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

**A. Alston, Cynthia, Y, ,**

Mailing Address 1441 Lynwood Ct

City  
Flossmoor

State  
IL

Zip Code  
60422-1930

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Clinical Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-633**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Alston, Cynthia, Y, ,**

Mailing Address 1441 Lynwood Ct

City  
Flossmoor

State  
IL

Zip Code  
60422-1930

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Clinical Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-626**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Amara, Jennifer, M, ,**

Mailing Address 222 Griswold Dr

City  
West Hartford

State  
CT

Zip Code  
06119-1023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1833.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-462**

Amount of Each Receipt this Period

166.67

☐ Memo Item

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

250.01

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

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Amara, Jennifer, M, ,**

Mailing Address 222 Griswold Dr

City  
West Hartford

State  
CT

Zip Code  
06119-1023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.37

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-456**

Amount of Each Receipt this Period

166.67

☐ Memo Item

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

**B. Anderson, Mary, V, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-537**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Anderson, Mary, V, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-531**

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)..... ►

366.67

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

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

FOR LINE NUMBER: PAGE 14 OF 258

(check only one)

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

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

A. Armstrong, Joanne, C, ,

Mailing Address 2807 Nottingham St

City  
HoustonState  
TXZip Code  
77005-2323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Clin Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-648

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

B. Armstrong, Joanne, C, ,

Mailing Address 2807 Nottingham St

City  
HoustonState  
TXZip Code  
77005-2323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Clin Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-641

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

C. Atkin, James, R, ,

Mailing Address 5 Highwood Xing

City  
BurlingtonState  
CTZip Code  
06013-1925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, IT Program Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-242

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

108.34

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 258

<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**

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

**A. Atkin, James, R, ,**

Mailing Address 5 Highwood Xing

City  
BurlingtonState  
CTZip Code  
06013-1925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, IT Program Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-238**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Avotins, Michael, T, ,**

Mailing Address 8 Springhill Farm Ct

City  
CockeysvilleState  
MDZip Code  
21030-1400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, NB Provider &amp; Svc Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-510**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Avotins, Michael, T, ,**

Mailing Address 8 Springhill Farm Ct

City  
CockeysvilleState  
MDZip Code  
21030-1400FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, NB Provider &amp; Svc Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-504**

Amount of Each Receipt this Period

250.00

☐ Memo Item**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 16 OF 258  
 (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**

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

**A. Bacon, Debra, J, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, CFO, Medicaid

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.98

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-202**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Bacon, Debra, J, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, CFO, Medicaid

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.98

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-198**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Baquet-Simpson, Alena, , ,**

Mailing Address 12166 Classic Dr

City  
Coral Springs

State  
FL

Zip Code  
33071-7747

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Medical Hlth Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-379**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

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

241.67



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

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

FOR LINE NUMBER: PAGE 17 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Baquet-Simpson, Alena, , ,**

Mailing Address 12166 Classic Dr

City  
Coral Springs

State  
FL

Zip Code  
33071-7747

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Medical Hlth Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-374**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Baran, Bethany, P, ,**

Mailing Address 222 Reverknolls

City  
Avon

State  
CT

Zip Code  
06001-2067

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Strat,Int & Perf Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-470**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Baran, Bethany, P, ,**

Mailing Address 222 Reverknolls

City  
Avon

State  
CT

Zip Code  
06001-2067

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Strat,Int & Perf Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-464**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

541.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 258

<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**

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

**A. Bard, Valerie, A, ,**

Mailing Address 373 Williams Rd

City  
WynnewoodState  
PAZip Code  
19096-1636FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Project Program Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-579**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Barley, Stephen, D, ,**

Mailing Address 19347 Mill Dam PI

City  
LeesburgState  
VAZip Code  
20176-1656FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-362**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Barley, Stephen, D, ,**

Mailing Address 19347 Mill Dam PI

City  
LeesburgState  
VAZip Code  
20176-1656FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-357**

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).....▶

220.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 258

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

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

**A. Barry, Max, D, ,**

Mailing Address 1 Riveredge St

City  
Milford

State  
CT

Zip Code  
06460-7233

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Institutional ABX

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-327**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Barry, Max, D, ,**

Mailing Address 1 Riveredge St

City  
Milford

State  
CT

Zip Code  
06460-7233

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Institutional ABX

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-323**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Baskin, Andrew, J, ,**

Mailing Address 8 Hanna Ln

City  
Phoenixville

State  
PA

Zip Code  
19460-2831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Clinical Quality

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-614**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 258

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

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

**A. Baskin, Andrew, J, ,**

Mailing Address 8 Hanna Ln

City  
Phoenixville

State  
PA

Zip Code  
19460-2831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Clinical Quality

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-607**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Baskin, William, C, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-623**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Baskin, William, C, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-616**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 21 OF 258

(check only one)

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

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

**A. Bates, Cynthia, J, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, HC Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-464**

Amount of Each Receipt this Period

250.00



Memo Item

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

**B. Bates, Cynthia, J, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, HC Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-458**

Amount of Each Receipt this Period

250.00



Memo Item

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

**C. Bauer, Craig, E, ,**

Mailing Address 2749 Barnhill Dr

City

Marietta

State

GA

Zip Code

30062-4811

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Segment Actuary, NA

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-546**

Amount of Each Receipt this Period

125.00



Memo Item

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

625.00

**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 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

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

A. Bauer, Craig, E, ,

Mailing Address 2749 Barnhill Dr

City  
MariettaState  
GAZip Code  
30062-4811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Segment Actuary, NA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-540

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

B. Bell, Debra, G, ,

Mailing Address 4689 W University Ave

City  
FresnoState  
CAZip Code  
93722-7322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Supvr, Plan Sponsor Suppt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-531

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

c. Bell, Debra, G, ,

Mailing Address 4689 W University Ave

City  
FresnoState  
CAZip Code  
93722-7322FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Supvr, Plan Sponsor Suppt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-525

Amount of Each Receipt this Period

25.00

☐ Memo Item

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 258

<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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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**

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

**A. Bergeron, Christian, , ,**

Mailing Address 43 Marjorie Ln

City  
ManchesterState  
CTZip Code  
06042-2076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Exec Dir, CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-51**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Bergeron, Christian, , ,**

Mailing Address 43 Marjorie Ln

City  
ManchesterState  
CTZip Code  
06042-2076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Exec Dir, CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-51**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Bernatavitz, Thomas, F, ,**

Mailing Address 1624 Stonington Cir

City  
North WalesState  
PAZip Code  
19454-3675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, FEHBP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-251**

Amount of Each Receipt this Period

250.00

☐ Memo Item**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 24 OF 258  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Bernatavitz, Thomas, F, ,**

Mailing Address 1624 Stonington Cir

City  
North Wales

State  
PA

Zip Code  
19454-3675

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, FEHBP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-247**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Bertolini, Mark, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-642**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**C. Bertolini, Mark, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-635**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

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

1083.32



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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Bhathena, Firdaus, , ,**

Mailing Address 60 William St

City  
Andover

State  
MA

Zip Code  
01810-2549

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Chief Digital Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-22**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Bhathena, Firdaus, , ,**

Mailing Address 60 William St

City  
Andover

State  
MA

Zip Code  
01810-2549

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Chief Digital Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-22**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Bisio, Jean, , ,**

Mailing Address 75 Deerpath Dr

City  
Oldsmar

State  
FL

Zip Code  
34677-2064

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Clinical Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-46**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

583.33

**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 26 OF 258  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Bisio, Jean, , ,**

Mailing Address 75 Deerpath Dr

City  
Oldsmar

State  
FL

Zip Code  
34677-2064

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Clinical Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-46**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Born, Richard, C, ,**

Mailing Address 6284 Royal Lakes Estates Ave

City  
Gonzales

State  
LA

Zip Code  
70737-8579

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Hlth Plan I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-17**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Born, Richard, C, ,**

Mailing Address 6284 Royal Lakes Estates Ave

City  
Gonzales

State  
LA

Zip Code  
70737-8579

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Hlth Plan I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-17**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

583.33

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Borovatz, Edward, J, ,**

Mailing Address 2824 Wood Duck Dr

City  
Virginia Beach

State  
VA

Zip Code  
23456-4454

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Rx Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-387**

Amount of Each Receipt this Period

130.00

☐ Memo Item

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

**B. Borovatz, Edward, J, ,**

Mailing Address 2824 Wood Duck Dr

City  
Virginia Beach

State  
VA

Zip Code  
23456-4454

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Rx Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-382**

Amount of Each Receipt this Period

130.00

☐ Memo Item

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

**C. Bosta, Jonathan, , , Jr.**

Mailing Address 134 Garvin Rd

City  
Hamden

State  
CT

Zip Code  
06518-1406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Tech Infrstr Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-90**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

285.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Bosta, Jonathan, , , Jr.**

Mailing Address 134 Garvin Rd

City  
Hamden

State  
CT

Zip Code  
06518-1406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Tech Infrstr Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-90**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Bottrill, Lorry, S, ,**

Mailing Address 3641 S Greythorne Way

City  
Chandler

State  
AZ

Zip Code  
85248-4158

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medicaid Hlth Plan II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1749.98

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-55**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Bottrill, Lorry, S, ,**

Mailing Address 3641 S Greythorne Way

City  
Chandler

State  
AZ

Zip Code  
85248-4158

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medicaid Hlth Plan II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1749.98

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-55**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

191.66

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

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

FOR LINE NUMBER: PAGE 29 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Britt, Brian, J, ,**

Mailing Address 330 W Meadow Dr

City  
Mechanicsburg

State  
PA

Zip Code  
17055-5153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Finance Governance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-385**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Britt, Brian, J, ,**

Mailing Address 330 W Meadow Dr

City  
Mechanicsburg

State  
PA

Zip Code  
17055-5153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Finance Governance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-380**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Broadway, Eddy, D, ,**

Mailing Address 1325 W Lynwood St

City  
Phoenix

State  
AZ

Zip Code  
85007-1918

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Hlth Plan I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

566.64

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-438**

Amount of Each Receipt this Period

8.33

☐ Memo Item

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

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

174.99

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

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

FOR LINE NUMBER: PAGE 30 OF 258

(check only one)

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

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

**A. Brubaker, Laurie, , ,**

Mailing Address 4202 Dave Alvin Dr

City  
Deer Park

State  
TX

Zip Code  
77536-1410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
SVP, Medicaid

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-564**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**B. Brubaker, Laurie, , ,**

Mailing Address 4202 Dave Alvin Dr

City  
Deer Park

State  
TX

Zip Code  
77536-1410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
SVP, Medicaid

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-558**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**C. Brunner, Scott, C, ,**

Mailing Address 5647 SW 36th Ter

City  
Topeka

State  
KS

Zip Code  
66614-4541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Bus Proj Prog Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-711**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

858.32

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Brunner, Scott, C, ,**

Mailing Address 5647 SW 36th Ter

City  
Topeka

State  
KS

Zip Code  
66614-4541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Bus Proj Prog Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-703**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Bucci, Michael, J, ,**

Mailing Address 14117 Big Branch Dr

City  
Dayton

State  
MD

Zip Code  
21036-1254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-104**

Amount of Each Receipt this Period

208.33

☐ Memo Item

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

**C. Bucci, Michael, J, ,**

Mailing Address 14117 Big Branch Dr

City  
Dayton

State  
MD

Zip Code  
21036-1254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2291.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-104**

Amount of Each Receipt this Period

208.33

☐ Memo Item

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

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

441.66

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Butkus, Elena, E, ,**

Mailing Address 521 W Superior St  
# 425

City  
Chicago

State  
IL

Zip Code  
60654-3410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, State Govt Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3666.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-61**

Amount of Each Receipt this Period

333.33

☐ Memo Item

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

**B. Butkus, Elena, E, ,**

Mailing Address 521 W Superior St  
# 425

City  
Chicago

State  
IL

Zip Code  
60654-3410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, State Govt Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3666.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-61**

Amount of Each Receipt this Period

333.33

☐ Memo Item

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

**C. Butler, Shannon, , ,**

Mailing Address 3017 E Valencia Dr

City  
Phoenix

State  
AZ

Zip Code  
85042-7137

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-468**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

749.99



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

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

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

A. Butler, Shannon, , ,

Mailing Address 3017 E Valencia Dr

City  
PhoenixState  
AZZip Code  
85042-7137FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 2018111910297-462

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

B. Campbell, Christopher, , ,

Mailing Address 76 Clearwood Pl

City  
SouthingtonState  
CTZip Code  
06489FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Performnce Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-71

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Campbell, Christopher, , ,

Mailing Address 76 Clearwood Pl

City  
SouthingtonState  
CTZip Code  
06489FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Performnce Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 2018111910297-71

Amount of Each Receipt this Period

25.00

☐ Memo Item

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)  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Campbell, Kathleen, M, ,**

Mailing Address 6 Heatherwood Grn

City  
Cromwell

State  
CT

Zip Code  
06416-2707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, 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 Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-240**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Campbell, Kathleen, M, ,**

Mailing Address 6 Heatherwood Grn

City  
Cromwell

State  
CT

Zip Code  
06416-2707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, 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 Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-236**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Cannon, Sharon, , ,**

Mailing Address 516 W Pine Ave  
Unit B

City  
North Wildwood

State  
NJ

Zip Code  
08260-3016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, MDCR Market Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-576**

Amount of Each Receipt this Period

18.75

☐ Memo Item

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

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

68.75

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Carey, Carolyn, M, ,**

Mailing Address 145 Abbe Rd

City  
South Windsor

State  
CT

Zip Code  
06074-1603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-184**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**B. Carey, Carolyn, M, ,**

Mailing Address 145 Abbe Rd

City  
South Windsor

State  
CT

Zip Code  
06074-1603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-180**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C. Carpenter, Peter, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-507**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

85.00

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Carpenter, Peter, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-501**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Carrow, Gregory, E, ,**

Mailing Address 9002 Herts Rd

City  
Spring

State  
TX

Zip Code  
77379-6725

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Health Plan CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-444**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Carsia, Donn, S, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Mgr, Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-541**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

65.00

# **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)

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Cass, Benjamin, G, ,**

Mailing Address 2789 Copperbush Ct  
Po Box 619

City  
Genoa

State  
NV

Zip Code  
89411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Senior Systems Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-626**

Amount of Each Receipt this Period

20.83

☐ Memo Item

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

**B. Cass, Benjamin, G, ,**

Mailing Address 2789 Copperbush Ct  
Po Box 619

City  
Genoa

State  
NV

Zip Code  
89411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Senior Systems Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-619**

Amount of Each Receipt this Period

20.83

☐ Memo Item

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

**C. Cavner, Michelle, , ,**

Mailing Address 3085 E Cardinal Ct

City  
Chandler

State  
AZ

Zip Code  
85286-5713

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-622**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

91.66

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Cavner, Michelle, , ,**

Mailing Address 3085 E Cardinal Ct

City  
Chandler

State  
AZ

Zip Code  
85286-5713

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-615**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Chambers, Glen, , ,**

Mailing Address 8000 Karl Rd

City  
Alexandria

State  
VA

Zip Code  
22308-1455

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Federal Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-35**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**C. Chambers, Glen, , ,**

Mailing Address 8000 Karl Rd

City  
Alexandria

State  
VA

Zip Code  
22308-1455

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Federal Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-35**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

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

883.32

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Chavarria, Malissa, M, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, MMA Acct Directors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-493**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

**B. Chavarria, Malissa, M, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, MMA Acct Directors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-487**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

**c. Chenevert, Lisa, S, ,**

Mailing Address 18502 Torgeson Ave NE

City  
Poulsbo

State  
WA

Zip Code  
98370-8423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-596**

Amount of Each Receipt this Period

20.00

☐ Memo Item

**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 PageFOR LINE NUMBER:  
(check only one)

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<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**

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

**A. Christie, Kurt, D, ,**

Mailing Address 1057 Kingscote Dr

City  
HarleysvilleState  
PAZip Code  
19438-1064FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Med Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-613**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Christie, Kurt, D, ,**

Mailing Address 1057 Kingscote Dr

City  
HarleysvilleState  
PAZip Code  
19438-1064FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Med Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-606**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Ciano, Christopher, A, ,**

Mailing Address 1300 SE 11th Ct

City  
Fort LauderdaleState  
FLZip Code  
33316-1349FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

SVP, Medicare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-355**

Amount of Each Receipt this Period

300.00

☐ Memo Item**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:  
(check only one)

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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**

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

**A. Ciano, Christopher, A, ,**

Mailing Address 1300 SE 11th Ct

City

Fort Lauderdale

State

FL

Zip Code

33316-1349

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

SVP, Medicare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-350**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**B. Ciarrocchi, Michael, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, NatlDis&ChanMgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-724**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Ciarrocchi, Michael, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, NatlDis&ChanMgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-716**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

800.00

# **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

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

A. Clark Robinson, Tanya, F, ,

Mailing Address 408 Ramsey Hill Dr

City  
CaryState  
NCZip Code  
27519-9579FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-175

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Clark Robinson, Tanya, F, ,

Mailing Address 408 Ramsey Hill Dr

City  
CaryState  
NCZip Code  
27519-9579FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 2018111910297-172

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Collins, Robin, D, ,

Mailing Address 124 Saint Croix Ave

City  
Cocoa BeachState  
FLZip Code  
32931-3335FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-604

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Collins, Robin, D, ,**

Mailing Address 124 Saint Croix Ave

City  
Cocoa Beach

State  
FL

Zip Code  
32931-3335

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-597**

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**B. Conflitti, Gina, M, ,**

Mailing Address 20073 N 94th Way

City  
Scottsdale

State  
AZ

Zip Code  
85255-5578

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medicaid CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-220**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Conflitti, Gina, M, ,**

Mailing Address 20073 N 94th Way

City  
Scottsdale

State  
AZ

Zip Code  
85255-5578

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medicaid CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-216**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

625.00

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

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

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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**

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

**A. Conicella, Marylee, , ,**

Mailing Address 1605 Burchfield Rd

City  
Allison Park

State  
PA

Zip Code  
15101-4039

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Ch Dental Offcr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-594**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Conicella, Marylee, , ,**

Mailing Address 1605 Burchfield Rd

City  
Allison Park

State  
PA

Zip Code  
15101-4039

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Ch Dental Offcr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-588**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Coplan, Stanley, , ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
User Experience Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-204**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

108.34

**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 PageFOR LINE NUMBER:  
(check only one)

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<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**

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

**A. Coplan, Stanley, , ,**

Mailing Address 3 Rose Ter

City  
Lafayette HillState  
PAZip Code  
19444-1635FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
User Experience Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-200**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Copley, Jonathan, E, ,**

Mailing Address 7703 Keller Way

City  
CrestwoodState  
KYZip Code  
40014-6571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Medicaid Hlth Plan I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-713**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Copley, Jonathan, E, ,**

Mailing Address 7703 Keller Way

City  
CrestwoodState  
KYZip Code  
40014-6571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Medicaid Hlth Plan I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-705**

Amount of Each Receipt this Period

250.00

☐ Memo Item**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  
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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**

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

**A. Cowley, Matthias, C.,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-226**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Cowley, Matthias, C.,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-222**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Coyne, Rodger, A.,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Invest Strat & Anlytc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-80**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 258  
(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**

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

**A. Coyne, Rodger, A, ,**

Mailing Address 5 Highview Rd

City  
SimsburyState  
CTZip Code  
06070-2115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Invest Strat &amp; Anlytc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-80**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Crowley, Howard, K, ,**

Mailing Address 3 Sanctuary Dr

City  
StrathamState  
NHZip Code  
03885-2606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Pharmacy Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-534**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Crowley, Howard, K, ,**

Mailing Address 3 Sanctuary Dr

City  
StrathamState  
NHZip Code  
03885-2606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Pharmacy Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-528**

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

750.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Cullen, Mary, Clare, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Bus Project Program Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-703**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Cullen, Mary, Clare, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Bus Project Program Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-696**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Culp, Gary, A, ,**

Mailing Address 2 Estates Dr

City  
Villa Park

State  
CA

Zip Code  
92861-2300

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, MDCR GM & Coach

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-132**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**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 49 OF 258

(check only one)

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

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

**A. Culp, Gary, A, ,**

Mailing Address 2 Estates Dr

City  
Villa Park

State  
CA

Zip Code  
92861-2300

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, MDCR GM & Coach

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-130**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Dagostino, Diane, S, ,**

Mailing Address 230 Granville Way

City  
Shavano Park

State  
TX

Zip Code  
78231-1406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-480**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Dagostino, Diane, S, ,**

Mailing Address 230 Granville Way

City  
Shavano Park

State  
TX

Zip Code  
78231-1406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-474**

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)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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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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**

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

**A. Dantonio, Frank, J, ,**

Mailing Address 110 Grand Meridien Forest Dr

City  
WildwoodState  
MOZip Code  
63005-4980FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-367**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Dantonio, Frank, J, ,**

Mailing Address 110 Grand Meridien Forest Dr

City  
WildwoodState  
MOZip Code  
63005-4980FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-362**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Darin, Paula, S, ,**

Mailing Address 65 Trout Brook Rd

City  
CheshireState  
CTZip Code  
06410-1251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Finance Info Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-461**

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Darin, Paula, S, ,**

Mailing Address 65 Trout Brook Rd

City  
Cheshire

State  
CT

Zip Code  
06410-1251

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Finance Info Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-455**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Davidson, John, E, ,**

Mailing Address 317 Oregon Ave

City  
New Castle

State  
DE

Zip Code  
19720-4332

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-410**

Amount of Each Receipt this Period

33.33

☐ Memo Item

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

**C. Davidson, John, E, ,**

Mailing Address 317 Oregon Ave

City  
New Castle

State  
DE

Zip Code  
19720-4332

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

366.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-405**

Amount of Each Receipt this Period

33.33

☐ Memo Item

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

316.66

**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 52 OF 258

(check only one)

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

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

A. Denz, Stephanie, M, ,

Mailing Address 1100 Wild Ginger Ln

City  
Fleming Island

State  
FL

Zip Code  
32003-3224

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
NAT Account Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-437

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Denz, Stephanie, M, ,

Mailing Address 1100 Wild Ginger Ln

City  
Fleming Island

State  
FL

Zip Code  
32003-3224

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
NAT Account Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 2018111910297-432

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Dibble, Kathleen, A, ,

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, MMA Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-182

Amount of Each Receipt this Period

50.00

☐ Memo Item

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:  
(check only one)

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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**

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

**A. Dibble, Kathleen, A, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, MMA Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-179**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Dioguardi, Jerome, D, ,**

Mailing Address 252 Outlook Dr

City

Pittsburgh

State

PA

Zip Code

15228-2145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Dental & Vision

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2333.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-634**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Dioguardi, Jerome, D, ,**

Mailing Address 252 Outlook Dr

City

Pittsburgh

State

PA

Zip Code

15228-2145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Dental & Vision

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2333.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-627**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

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

133.34

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Diverniero, Ellen, , ,**

Mailing Address 62 Buttonwood Path

City  
Hamden

State  
CT

Zip Code  
06518-1531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Talent Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-336**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Diverniero, Ellen, , ,**

Mailing Address 62 Buttonwood Path

City  
Hamden

State  
CT

Zip Code  
06518-1531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Talent Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-331**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Dixon, Heather, , ,**

Mailing Address 490 West Rd

City  
New Canaan

State  
CT

Zip Code  
06840-2510

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Cntrl & Chf Acct Offcr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-19**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

333.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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**

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

**A. Dixon, Heather, , ,**

Mailing Address 490 West Rd

City  
New CanaanState  
CTZip Code  
06840-2510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP,Cntrl & Chf Acct Offcr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-19**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Doyle, Edward, S, ,**

Mailing Address 17 Stonehenge Rd

City  
MorristownState  
NJZip Code  
07960-2649FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, PayFlex/NAB/WC/SI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2041.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-681**

Amount of Each Receipt this Period

20.83

☐ Memo Item

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

**C. Doyle, Edward, S, ,**

Mailing Address 17 Stonehenge Rd

City  
MorristownState  
NJZip Code  
07960-2649FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, PayFlex/NAB/WC/SI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2041.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-674**

Amount of Each Receipt this Period

20.83

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

291.66

**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:  
(check only one)

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

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

**A. Dresdale, Arthur, R, ,**

Mailing Address 450 E 83rd St  
Apt 10B

City  
New York

State  
NY

Zip Code  
10028-6265

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Clinical Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-630**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Dresdale, Arthur, R, ,**

Mailing Address 450 E 83rd St  
Apt 10B

City  
New York

State  
NY

Zip Code  
10028-6265

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Clinical Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-623**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Dunphy, Kathrine, A, ,**

Mailing Address 1129 Velvet Leaf Dr

City  
Madison

State  
WI

Zip Code  
53719-4509

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Informatics Cnslt/Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-413**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

191.66



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

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

FOR LINE NUMBER: PAGE 57 OF 258

(check only one)

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

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

A. Dunphy, Kathrine, A, ,

Mailing Address 1129 Velvet Leaf Dr

City  
MadisonState  
WIZip Code  
53719-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Informatics Cnslt/Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 201811910297-408

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Dyer, Daniel, M, ,

Mailing Address 169 Stanley Hill Rd

City  
FryeburgState  
MEZip Code  
04037-4001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Exec Dir, Medicare GM I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 201811910297-309

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Elgomayel, Ramzy, J, ,

Mailing Address 755 Apsley Way

City  
AlpharettaState  
GAZip Code  
30022-8030FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, ACS Network Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-655

Amount of Each Receipt this Period

260.00

☐ Memo Item

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

305.00

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 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

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

A. Elgomayel, Ramzy, J, ,

Mailing Address 755 Apsley Way

City  
AlpharettaState  
GAZip Code  
30022-8030FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, ACS Network Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 201811910297-648

Amount of Each Receipt this Period

260.00

☐ Memo Item

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

B. Engels, Adrian, , ,

Mailing Address 2523 E Oak Grove Dr

City  
SandyState  
UTZip Code  
84092-7132FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Application Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 201811910297-368

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Erney, Constance, L, ,

Mailing Address 600 Pine Rd

City  
PalmyraState  
PAZip Code  
17078-8900FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, CFS Mkt Sls&amp;Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-310

Amount of Each Receipt this Period

62.50

☐ Memo Item

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

342.50

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 59 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Erney, Constance, L, ,**

Mailing Address 600 Pine Rd

City  
Palmyra

State  
PA

Zip Code  
17078-8900

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, CFS Mkt Sls&Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-306**

Amount of Each Receipt this Period

62.50

☐ Memo Item

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

**B. Everhart, David, E, ,**

Mailing Address 3529 MacPherson PI

City  
Cincinnati

State  
OH

Zip Code  
45245-3031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, MDCR Market Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-62**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Everhart, David, E, ,**

Mailing Address 3529 MacPherson PI

City  
Cincinnati

State  
OH

Zip Code  
45245-3031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, MDCR Market Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-62**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

229.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 60 OF 258  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

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

**A. Fagan, Kieran, , ,**

Mailing Address 45 Stiles Ave

City  
Morris PlainsState  
NJZip Code  
07950-1847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Bus Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.30

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018**Transaction ID : 2018102211216-7**

Amount of Each Receipt this Period

58.30

☐ Memo Item

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

**B. Fagan, Kieran, , ,**

Mailing Address 45 Stiles Ave

City  
Morris PlainsState  
NJZip Code  
07950-1847FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Bus Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.30

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018**Transaction ID : 2018111910297-7**

Amount of Each Receipt this Period

58.30

☐ Memo Item

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

**C. Fantini, Debra, , ,**

Mailing Address 3126 Potshop Rd

City  
NorristownState  
PAZip Code  
19403-3820FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Product Manager/Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018**Transaction ID : 2018102211216-556**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.60

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

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

FOR LINE NUMBER: PAGE 61 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Fantini, Debra, , ,**

Mailing Address 3126 Potshop Rd

City  
Norristown

State  
PA

Zip Code  
19403-3820

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Product Manager/Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-550**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Faulkner, Mark, W, ,**

Mailing Address 1901 Hillside Ave

City  
Nashville

State  
TN

Zip Code  
37203-5438

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Gov't Bus Excellence

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-299**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Faulkner, Mark, W, ,**

Mailing Address 1901 Hillside Ave

City  
Nashville

State  
TN

Zip Code  
37203-5438

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Gov't Bus Excellence

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-295**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

525.00

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Figueredo, Grace, , ,**

Mailing Address 43 Hoskins Rd

City  
Bloomfield

State  
CT

Zip Code  
06002-1111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Diversity & Inclusion

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-333**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Finke, Daniel, P, ,**

Mailing Address 26 Webster Point Rd

City  
Madison

State  
CT

Zip Code  
06443-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
SVP Products & Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-504**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Finke, Daniel, P, ,**

Mailing Address 26 Webster Point Rd

City  
Madison

State  
CT

Zip Code  
06443-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
SVP Products & Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-498**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

583.33

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 63 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Fischer, Bradley, P, ,**

Mailing Address 4165 Sudbrook Sq E

City  
New Albany

State  
OH

Zip Code  
43054-9686

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-513**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Fischer, Bradley, P, ,**

Mailing Address 4165 Sudbrook Sq E

City  
New Albany

State  
OH

Zip Code  
43054-9686

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-507**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Fischer, Edward, C, ,**

Mailing Address 14639 N Coral Gables Dr

City  
Phoenix

State  
AZ

Zip Code  
85023-6293

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Bus Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-65**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

583.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 258

<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**

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

**A. Fischer, Edward, C, ,**

Mailing Address 14639 N Coral Gables Dr

City  
PhoenixState  
AZZip Code  
85023-6293FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Bus Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-65**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Fisher, Stephen, P, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-460**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Fisher, Stephen, P, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-454**

Amount of Each Receipt this Period

25.00

☐ Memo Item**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:  
(check only one)

PAGE 65 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Fleming, Theodore, L, ,**

Mailing Address 18 Meadow Xing

City  
Simsbury

State  
CT

Zip Code  
06070-1007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Aetna University

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-142**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Fleming, Theodore, L, ,**

Mailing Address 18 Meadow Xing

City  
Simsbury

State  
CT

Zip Code  
06070-1007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Aetna University

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-140**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Flora, Nicole, R, ,**

Mailing Address 10561 Haywood Dr

City  
Las Vegas

State  
NV

Zip Code  
89135-2851

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-42**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

583.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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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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**

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

**A. Flora, Nicole, R, ,**

Mailing Address 10561 Haywood Dr

City  
Las VegasState  
NVZip Code  
89135-2851FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 201811910297-42**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Follmer Crowley, Cynthia, J, ,**

Mailing Address 5426 Dunwoody Glen Ct

City  
AtlantaState  
GAZip Code  
30360-1364FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Exec Dir, MDCR GM & Coach

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 201811910297-178**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Fowler, Patrina, L, ,**

Mailing Address 4520 Alexandra Dr

City  
ColleyvilleState  
TXZip Code  
76034-4256FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Medicaid Hlth Plan I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-560**

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

353.33

**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 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Fowler, Patrina, L, ,**

Mailing Address 4520 Alexandra Dr

City  
Colleyville

State  
TX

Zip Code  
76034-4256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Hlth Plan I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-554**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Freund, Kathleen, M, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Project Program Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-662**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Friedlander, Mark, S, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, CMO, BH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-737**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

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

311.67

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

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

FOR LINE NUMBER: PAGE 68 OF 258

(check only one)

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

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

**A. Friedlander, Mark, S, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, CMO, BH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-729**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Frommeyer, Richard, A, ,**

Mailing Address 415 Laurel Ave

City  
Saint Paul

State  
MN

Zip Code  
55102-2015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Group Medicare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3666.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-317**

Amount of Each Receipt this Period

333.33

☐ Memo Item

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

**C. Frommeyer, Richard, A, ,**

Mailing Address 415 Laurel Ave

City  
Saint Paul

State  
MN

Zip Code  
55102-2015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Group Medicare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3666.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-313**

Amount of Each Receipt this Period

333.33

☐ Memo Item

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

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

708.33

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

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

FOR LINE NUMBER: PAGE 69 OF 258

(check only one)

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

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

A. Fusaro, Michael, , ,

Mailing Address 2020 N Bayshore Dr  
Apt 2301

City  
Miami

State  
FL

Zip Code  
33137-5168

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
NAT Sr Account Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-704

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

B. Fusaro, Michael, , ,

Mailing Address 2020 N Bayshore Dr  
Apt 2301

City  
Miami

State  
FL

Zip Code  
33137-5168

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
NAT Sr Account Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-697

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

C. Gard, Alan, , ,

Mailing Address 55 Brightman Cir

City  
South Windsor

State  
CT

Zip Code  
06074-1590

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir,SgHd Actrl(Cred)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-348

Amount of Each Receipt this Period

416.65

☐ Memo Item

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

499.99

TOTAL This Period (last page this line number 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 OF 258

(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**

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

**A. Gard, Alan, , ,**

Mailing Address 55 Brightman Cir

City  
South WindsorState  
CTZip Code  
06074-1590FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Exec Dir, SgHd Actrl(Cred)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-343**

Amount of Each Receipt this Period

416.65

☐ Memo Item

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

**B. Gareis, Joseph, A, ,**

Mailing Address 75 Little Brook Rd

City  
New HartfordState  
CTZip Code  
06057-4127FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Supvr, Informatics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-136**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Gareis, Joseph, A, ,**

Mailing Address 75 Little Brook Rd

City  
New HartfordState  
CTZip Code  
06057-4127FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Supvr, Informatics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-134**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

466.65

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

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Ghent, Renee, L, ,**

Mailing Address 179 Old Marlborough Tpke

City  
Portland

State  
CT

Zip Code  
06480-4008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Digital Prog Del

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-465**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Ghent, Renee, L, ,**

Mailing Address 179 Old Marlborough Tpke

City  
Portland

State  
CT

Zip Code  
06480-4008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Digital Prog Del

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-459**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Goddard, Jeffrey, W, ,**

Mailing Address 124 Dunleith Way

City  
Irmo

State  
SC

Zip Code  
29063-8272

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, President Meritain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

921.25

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-137**

Amount of Each Receipt this Period

83.75

☐ Memo Item

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

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

283.75

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

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

FOR LINE NUMBER: PAGE 72 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Goddard, Jeffrey, W, ,**

Mailing Address 124 Dunleith Way

City  
Irmo

State  
SC

Zip Code  
29063-8272

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, President Meritain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-135**

Amount of Each Receipt this Period

83.75

☐ Memo Item

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

**B. Godin, Wade, , ,**

Mailing Address 2352 Chamberlain Hwy

City  
Berlin

State  
CT

Zip Code  
06037-3960

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir,RELeaseMgt/Strat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-273**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Godin, Wade, , ,**

Mailing Address 2352 Chamberlain Hwy

City  
Berlin

State  
CT

Zip Code  
06037-3960

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir,RELeaseMgt/Strat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-269**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

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

167.09



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 258

<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**

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

**A. Golash, Terry, J, ,**Mailing Address 799 Park Ave  
Apt 6CCity  
New YorkState  
NYZip Code  
10021-3495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, Clin Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-668**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Golash, Terry, J, ,**Mailing Address 799 Park Ave  
Apt 6CCity  
New YorkState  
NYZip Code  
10021-3495FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, Clin Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-661**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Goldberg, Derek, S., ,**

Mailing Address 606 Canoe Run Pl

City  
Manakin SabotState  
VAZip Code  
23103-3211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, GM, SE Asia

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-183**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

108.34

**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 74 OF 258

(check only one)

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

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

A. Goldberg, Lisa, A, ,

Mailing Address 204 Spruce St  
PO BOX 168

City  
Jeannette

State  
PA

Zip Code  
15644-2436

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Tech Infrstr Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-392

Amount of Each Receipt this Period

20.83

☐ Memo Item

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

B. Goldberg, Lisa, A, ,

Mailing Address 204 Spruce St  
PO BOX 168

City  
Jeannette

State  
PA

Zip Code  
15644-2436

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Tech Infrstr Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-387

Amount of Each Receipt this Period

20.83

☐ Memo Item

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

C. Goodheart, Kenneth, J, ,

Mailing Address 633 Esfun Trce

City  
Sandy Springs

State  
GA

Zip Code  
30328-8215

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Client Solution Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-172

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

66.66

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 75 OF 258

(check only one)

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

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

**A. Goodheart, Kenneth, J., ,**

Mailing Address 633 Esfun Trce

City

Sandy Springs

State

GA

Zip Code

30328-8215

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Client Solution Lead

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-169**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Grant, Janet, , ,**

Mailing Address 665 Claymont Court Cir

City

Ballwin

State

MO

Zip Code

63011-2520

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Region Head

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-456**

Amount of Each Receipt this Period

275.00

☐ Memo Item

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

**C. Grant, Janet, , ,**

Mailing Address 665 Claymont Court Cir

City

Ballwin

State

MO

Zip Code

63011-2520

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Region Head

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

3025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-450**

Amount of Each Receipt this Period

275.00

☐ Memo Item

**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 76 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Graves, Susan, V, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Pharm Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-495**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Graves, Susan, V, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Pharm Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-489**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Green, Floyd, W, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Comm Rel & Urban Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-120**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 77 OF 258

(check only one)

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

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

**A. Green, Floyd, W, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Comm Rel & Urban Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-119**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**B. Guerra-Garcia, Humberto, , ,**

Mailing Address 2055 White Horse Rd

City

Berwyn

State

PA

Zip Code

19312-2127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Clinical Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-647**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Guerra-Garcia, Humberto, , ,**

Mailing Address 2055 White Horse Rd

City

Berwyn

State

PA

Zip Code

19312-2127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Clinical Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-640**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

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

383.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 258

(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**

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

**A. Guertin, Shawn, , ,**

Mailing Address 207 S East Rd

City  
New HartfordState  
CTZip Code  
06057-3625FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
EVP, CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-232**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**B. Guertin, Shawn, , ,**

Mailing Address 207 Southeast Rd

City  
New HartfordState  
CTZip Code  
06057-3625FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
EVP, CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-228**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**C. Ha, Jin, Oak, ,**

Mailing Address 310 Devon Rd

City  
TenafllyState  
NJZip Code  
07670-3137FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Student Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-481**

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)..... ►

933.32

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

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

FOR LINE NUMBER: PAGE 79 OF 258

(check only one)

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

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

**A. Ha, Jin, Oak, ,**

Mailing Address 310 Devon Rd

City  
Tenaflly

State  
NJ

Zip Code  
07670-3137

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Student Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-475**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Hale, Greg, C, ,**

Mailing Address 1615 William Penn Dr

City  
Naperville

State  
IL

Zip Code  
60563-2498

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, WC Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-396**

Amount of Each Receipt this Period

28.08

☐ Memo Item

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

**C. Hale, Greg, C, ,**

Mailing Address 1615 William Penn Dr

City  
Naperville

State  
IL

Zip Code  
60563-2498

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, WC Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

308.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-391**

Amount of Each Receipt this Period

28.08

☐ Memo Item

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

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

156.16

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 80 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Hallowell, Deborah, A, ,**

Mailing Address 10 Shamrock Cir

City  
Windsor

State  
CT

Zip Code  
06095-1446

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Lead Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-608**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Hallowell, Deborah, A, ,**

Mailing Address 10 Shamrock Cir

City  
Windsor

State  
CT

Zip Code  
06095-1446

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Lead Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-601**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Hamilton, Chester, R, ,**

Mailing Address 4635 Pepper Mill St

City  
Moorpark

State  
CA

Zip Code  
93021-2408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-708**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

225.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 258

(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**

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

**A. Hamilton, Chester, R, ,**

Mailing Address 4635 Pepper Mill St

City  
MoorparkState  
CAZip Code  
93021-2408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-700**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Hamilton, Katherine, , ,**

Mailing Address 125 W New England Ave

City  
WorthingtonState  
OHZip Code  
43085-3537FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, MMA Acct Directors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-107**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Hamilton, Katherine, , ,**

Mailing Address 125 W New England Ave

City  
WorthingtonState  
OHZip Code  
43085-3537FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, MMA Acct Directors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-107**

Amount of Each Receipt this Period

25.00

☐ Memo Item**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:  
(check only one)

PAGE 82 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Hansen, Renae, D, ,**

Mailing Address 213 Crestridge Ln

City  
Bismarck

State  
ND

Zip Code  
58503-6258

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 201811910297-585**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Harley, Jayna, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Network Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 201811910297-497**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Haynes, Kathleen, B, ,**

Mailing Address 12331 Dubarry Dr

City  
Carmel

State  
IN

Zip Code  
46033-8367

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Clinical Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-28**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

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

81.67

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 83 OF 258

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

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

**A. Haynes, Kathleen, B, ,**

Mailing Address 12331 Dubarry Dr

City  
Carmel

State  
IN

Zip Code  
46033-8367

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Clinical Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-28**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Haythorn, Kimberly, Ann S, ,**

Mailing Address 40 Cavan Rd

City

East Hartford

State

CT

Zip Code

06118-2011

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Strat Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-544**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

**C. Haythorn, Kimberly, Ann S, ,**

Mailing Address 40 Cavan Rd

City

East Hartford

State

CT

Zip Code

06118-2011

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Strat Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-538**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

121.67

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

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

FOR LINE NUMBER: PAGE 84 OF 258

(check only one)

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

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

A. Heerwagen, Louie, M, , III

Mailing Address 6026 FM 1886

City  
AzleState  
TXZip Code  
76020-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

PLS Sr Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-639

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Heerwagen, Louie, M, , III

Mailing Address 6026 FM 1886

City  
AzleState  
TXZip Code  
76020-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

PLS Sr Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-632

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Helke, Susan, J, ,

Mailing Address 9124 Beechmont Ct

City  
TwinsburgState  
OHZip Code  
44087-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, MMA Mkt Sls &amp; Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-306

Amount of Each Receipt this Period

250.00

☐ Memo Item

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 PageFOR LINE NUMBER: PAGE 85 OF 258  
(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**

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

**A. Helke, Susan, J, ,**

Mailing Address 9124 Beechmont Ct

City  
TwinsburgState  
OHZip Code  
44087-1986FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, MMA Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-302**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Henderson, Todd, D, ,**

Mailing Address 311 Woodland Rd

City  
CoventryState  
CTZip Code  
06238-2352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Portfolio Mgmt Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-272**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Henderson, Todd, D, ,**

Mailing Address 311 Woodland Rd

City  
CoventryState  
CTZip Code  
06238-2352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Portfolio Mgmt Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-268**

Amount of Each Receipt this Period

25.00

☐ Memo Item**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 86 OF 258

(check only one)

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

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

**A. Hendrich, Steven, L, ,**

Mailing Address 3268 Locust Holw

City  
Nolensville

State  
TN

Zip Code  
37135-7425

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-296**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Herasimowicz, Janusz, , ,**

Mailing Address 50 Castlerock Ln

City  
Bolton

State  
CT

Zip Code  
06043-7856

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Mgr, Distributed Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-727**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Herasimowicz, Janusz, , ,**

Mailing Address 50 Castlerock Ln

City  
Bolton

State  
CT

Zip Code  
06043-7856

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Mgr, Distributed Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-719**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

70.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 87 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Herring, Melanie, A, ,**

Mailing Address 3206 E Mountain Vista Dr

City  
Phoenix

State  
AZ

Zip Code  
85048-5800

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, MDCD Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-447**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Herring, Melanie, A, ,**

Mailing Address 3206 E Mountain Vista Dr

City  
Phoenix

State  
AZ

Zip Code  
85048-5800

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, MDCD Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-441**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Heverly, Larry, R, ,**

Mailing Address 119 Inverrary Dr

City  
Blue Bell

State  
PA

Zip Code  
19422-3253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Architect Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-123**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

249.99

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

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

FOR LINE NUMBER: PAGE 88 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Heverly, Larry, R, ,**

Mailing Address 119 Inverrary Dr

City  
Blue Bell

State  
PA

Zip Code  
19422-3253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Architect Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-122**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Hiestand, David, M, ,**

Mailing Address 4008 Norbourne Blvd

City  
Louisville

State  
KY

Zip Code  
40207-3806

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Clinical Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-433**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Hiestand, David, M, ,**

Mailing Address 4008 Norbourne Blvd

City  
Louisville

State  
KY

Zip Code  
40207-3806

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Clinical Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-428**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

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

166.67



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

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

FOR LINE NUMBER: PAGE 89 OF 258  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Hiles, Andrew, H, ,**

Mailing Address PO Box 1866

City  
Blue Ridge

State  
GA

Zip Code  
30513-0033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Plan Sponsor Insights

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-528**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Hiles, Andrew, H, ,**

Mailing Address PO Box 1866

City  
Blue Ridge

State  
GA

Zip Code  
30513-0033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Plan Sponsor Insights

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-522**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Himes, Bertha, E, ,**

Mailing Address 11306 Lake Rd NE

City  
Millersport

State  
OH

Zip Code  
43046-9516

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Commercial Svc Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-290**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

283.33

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 90 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Himes, Bertha, E, ,**

Mailing Address 11306 Lake Rd NE

City  
Millersport

State  
OH

Zip Code  
43046-9516

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Commercial Svc Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-286**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Hokaj, Amy, L, ,**

Mailing Address 22685 Marlys Dr

City  
Rocky River

State  
OH

Zip Code  
44116-3755

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Clinical Team Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-457**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Hokaj, Amy, L, ,**

Mailing Address 22685 Marlys Dr

City  
Rocky River

State  
OH

Zip Code  
44116-3755

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Clinical Team Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-451**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

133.33

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

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

FOR LINE NUMBER: PAGE 91 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Holub, Robin, K, ,**

Mailing Address 34 Lee Rd

City  
Audubon

State  
PA

Zip Code  
19403-2044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Bus Consultation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-684**

Amount of Each Receipt this Period

33.33

☐ Memo Item

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

**B. Holub, Robin, K, ,**

Mailing Address 34 Lee Rd

City  
Audubon

State  
PA

Zip Code  
19403-2044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Bus Consultation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-677**

Amount of Each Receipt this Period

33.33

☐ Memo Item

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

**C. Horst, David, , ,**

Mailing Address 1936 Main St

City  
Glastonbury

State  
CT

Zip Code  
06033-2944

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Audit Portfolio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-329**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

116.66

**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:  
(check only one)

PAGE 92 OF 258

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

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

**A. Horst, David, , ,**

Mailing Address 1936 Main St

City  
Glastonbury

State  
CT

Zip Code  
06033-2944

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Audit Portfolio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-325**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Hylton, Michael, A, ,**

Mailing Address 19101 Harbor Cove Ct

City  
Lutz

State  
FL

Zip Code  
33558-9702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Senior Network Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-402**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Hylton, Michael, A, ,**

Mailing Address 19101 Harbor Cove Ct

City  
Lutz

State  
FL

Zip Code  
33558-9702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Senior Network Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-397**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

216.66

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

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

FOR LINE NUMBER: PAGE 93 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Imig, Sally, I, ,**

Mailing Address 7201 Valburn Dr

City  
Austin

State  
TX

Zip Code  
78731-1822

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, PLS Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-185**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Imig, Sally, I, ,**

Mailing Address 7201 Valburn Dr

City  
Austin

State  
TX

Zip Code  
78731-1822

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, PLS Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-181**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**c. Ingher, Carol, B, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir,S&A Mgt,AHM&HDMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-257**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

220.00

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Jackson, Colby, C, ,**

Mailing Address 284 Yearling Blvd

City  
Saint Johns

State  
FL

Zip Code  
32259-8646

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
MMA Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-115**

Amount of Each Receipt this Period

20.83

☐ Memo Item

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

**B. Jackson, Colby, C, ,**

Mailing Address 284 Yearling Blvd

City  
Saint Johns

State  
FL

Zip Code  
32259-8646

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
MMA Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-115**

Amount of Each Receipt this Period

20.83

☐ Memo Item

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

**C. Jaxsens, Patrick, A, ,**

Mailing Address 204 Painted Fall Way

City  
Cary

State  
NC

Zip Code  
27513-3528

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

291.70

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-47**

Amount of Each Receipt this Period

29.17

☐ Memo Item

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

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

70.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 258

(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**

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

**A. Jacksens, Patrick, A, ,**

Mailing Address 204 Painted Fall Way

City  
CaryState  
NCZip Code  
27513-3528FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-47**

Amount of Each Receipt this Period

29.17

☐ Memo Item

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

**B. Jagmin, Christopher, L, ,**Mailing Address 8181 Douglas Ave  
610City  
DallasState  
TXZip Code  
75225-6561FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Regional Med

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-611**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**C. Jagmin, Christopher, L, ,**Mailing Address 8181 Douglas Ave  
610City  
DallasState  
TXZip Code  
75225-6561FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Regional Med

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-604**

Amount of Each Receipt this Period

416.66

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

862.49

# **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  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Janakas, Anthony, A, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

RE Sr Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-717**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Janakas, Anthony, A, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

RE Sr Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-709**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Jeandell, Eric, , ,**

Mailing Address 35 Buckingham Rd

City  
Avon

State  
CT

Zip Code  
06001-5109

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Intl Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-126**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**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  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Jefferson, Alice, W, ,**

Mailing Address 1103 Parkway Ave

City  
Ewing

State  
NJ

Zip Code  
08628-3005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Clinical Health Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-165**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Jefferson, Alice, W, ,**

Mailing Address 1103 Parkway Ave

City  
Ewing

State  
NJ

Zip Code  
08628-3005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Clinical Health Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-162**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Jelinek, Rick, M, ,**

Mailing Address 15 Cedarwood Dr

City  
Greenwich

State  
CT

Zip Code  
06830-3904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

EVP, Enterprise Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-725**

Amount of Each Receipt this Period

416.66

☐ Memo Item

**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  
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(check only one)

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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**

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

**A. Jelinek, Rick, M, ,**

Mailing Address 15 Cedarwood Dr

City  
Greenwich

State  
CT

Zip Code  
06830-3904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
EVP, Enterprise Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 201811910297-717**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**B. Jensen, Claus, T, ,**

Mailing Address 30 Horseshoe Path

City  
Pawling

State  
NY

Zip Code  
12564-2227

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Ch Technology Offcr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 201811910297-603**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Jevin, John, G, ,**

Mailing Address 6773 Pleasant Gate Ln

City  
College Grove

State  
TN

Zip Code  
37046-1433

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Application Dvlp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-301**

Amount of Each Receipt this Period

20.83

☐ Memo Item

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

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

457.49

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Jevin, John, G, ,**

Mailing Address 6773 Pleasant Gate Ln

City

College Grove

State

TN

Zip Code

37046-1433

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Application Dvlp

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-297**

Amount of Each Receipt this Period

20.83



Memo Item

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

**B. Jimenez, Marisol, , ,**

Mailing Address 22 Centennial Pl

City

Framingham

State

MA

Zip Code

01701-4054

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Executive Assistant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-463**

Amount of Each Receipt this Period

25.00



Memo Item

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

**C. Jimenez, Marisol, , ,**

Mailing Address 22 Centennial Pl

City

Framingham

State

MA

Zip Code

01701-4054

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Executive Assistant

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-457**

Amount of Each Receipt this Period

25.00



Memo Item

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

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

70.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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**

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

**A. Johnson, Yolanda, G, ,**

Mailing Address 4700 Shellbark Dr

City  
YpsilantiState  
MIZip Code  
48197-6832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Employee Relat Cnslt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-698**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Johnson, Yolanda, G, ,**

Mailing Address 4700 Shellbark Dr

City  
YpsilantiState  
MIZip Code  
48197-6832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Employee Relat Cnslt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-691**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Jones, Greg, A, ,**

Mailing Address 33 W St NW

City  
WashingtonState  
DCZip Code  
20001-1068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-518**

Amount of Each Receipt this Period

125.00

☐ Memo Item**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:  
(check only one)

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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**

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

**A. Jones, Greg, A, ,**

Mailing Address 33 W St NW

City  
Washington

State  
DC

Zip Code  
20001-1068

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-512**

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**B. Jones, Lori, A, ,**

Mailing Address 274 Bradford Ln

City  
Lansdale

State  
PA

Zip Code  
19446-6604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Financial Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-583**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Jones, Lori, A, ,**

Mailing Address 274 Bradford Ln

City  
Lansdale

State  
PA

Zip Code  
19446-6604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Financial Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-577**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

175.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Kadakia, Kunal, , ,**

Mailing Address 41 Hicks Ave

City  
Syosset

State  
NY

Zip Code  
11791-5840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, IT Program Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-31**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Kadakia, Kunal, , ,**

Mailing Address 41 Hicks Ave

City  
Syosset

State  
NY

Zip Code  
11791-5840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, IT Program Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-31**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Kalat, Carrah, M, ,**

Mailing Address 40 Landing Rd

City  
Higganum

State  
CT

Zip Code  
06441-4138

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Sales Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-371**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

266.66

**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 PageFOR LINE NUMBER: PAGE 103 OF 258  
(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**

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

**A. Kalat, Carrah, M, ,**

Mailing Address 40 Landing Rd

City  
HigganumState  
CTZip Code  
06441-4138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Sales Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-366**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Kane, James, J, ,**

Mailing Address 451 Rogers Ave

City  
W SpringfieldState  
MAZip Code  
01089-1993FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-111**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Kane, James, J, ,**

Mailing Address 451 Rogers Ave

City  
W SpringfieldState  
MAZip Code  
01089-1993FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-111**

Amount of Each Receipt this Period

83.33

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

266.66

**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:  
(check only one)

PAGE 104 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Kavouras, Mike, P, ,**

Mailing Address 10920 Green Manor Dr

City  
Orland Park

State  
IL

Zip Code  
60467-9429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, MDCR Advantage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-366**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Kavouras, Mike, P, ,**

Mailing Address 10920 Green Manor Dr

City  
Orland Park

State  
IL

Zip Code  
60467-9429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, MDCR Advantage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-361**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Keim, Scott, C, ,**

Mailing Address 3330 Upper Lake Gulch Rd

City  
Larkspur

State  
CO

Zip Code  
80118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, ACS Rg Strat & Op

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-233**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

108.34

**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 PageFOR LINE NUMBER: PAGE 105 OF 258  
(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**

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

**A. Keim, Scott, C, ,**

Mailing Address 3330 Upper Lake Gulch Rd

City  
LarkspurState  
COZip Code  
80118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, ACS Rg Strat &amp; Op

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-229**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Keith, Fredrick, R, ,**

Mailing Address 2543 Woodcreek Rd

City  
LouisvilleState  
KYZip Code  
40205-2307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-45**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Keith, Fredrick, R, ,**

Mailing Address 2543 Woodcreek Rd

City  
LouisvilleState  
KYZip Code  
40205-2307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-45**

Amount of Each Receipt this Period

50.00

☐ Memo Item**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:  
(check only one)

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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**

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

**A. Kelly, Timothy, G, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Natl Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-156**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Kelly, Timothy, G, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Natl Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-153**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Kennedy, Mark, E, ,**

Mailing Address 1569 Jasper Pl

City  
Bellingham

State  
WA

Zip Code  
98226-8729

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, IT Program Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-270**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

525.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 107 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Kennedy, Mark, E, ,**

Mailing Address 1569 Jasper Pl

City  
Bellingham

State  
WA

Zip Code  
98226-8729

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, IT Program Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-266**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Kessler, Robert, M, ,**

Mailing Address 4617 E Berneil Dr

City  
Phoenix

State  
AZ

Zip Code  
85028-5520

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Local Markets Legal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-219**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Kessler, Robert, M, ,**

Mailing Address 4617 E Berneil Dr

City  
Phoenix

State  
AZ

Zip Code  
85028-5520

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Local Markets Legal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-215**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

525.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 108 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Kidd, James, W, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, IT Program Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-275**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Kidd, James, W, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, IT Program Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-271**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. King, Mary, P, ,**

Mailing Address 20 N Carpenter St  
4-s

City  
Chicago

State  
IL

Zip Code  
60607-6001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, NAT Sales & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-59**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

225.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 109 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. King, Mary, P, ,**

Mailing Address 20 N Carpenter St  
4-s

City  
Chicago

State  
IL

Zip Code  
60607-6001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, NAT Sales & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-59**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. King, Michael, S, ,**

Mailing Address 127 Waverly Cir

City

Phoenixville

State

PA

Zip Code

19460-2526

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, MMA Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-541**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. King, Michael, S, ,**

Mailing Address 127 Waverly Cir

City

Phoenixville

State

PA

Zip Code

19460-2526

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, MMA Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-535**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

191.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 110 OF 258  
(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**

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

**A. Kissner, Lawrence, J, ,**

Mailing Address 616 Torrey Pines Trl

City  
RichmondState  
KYZip Code  
40475-7527FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Hlth Plan I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-603**

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**B. Klanjsek, Oza, , ,**

Mailing Address 455 S High St

City  
DenverState  
COZip Code  
80209-2631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Architect Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-339**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Klanjsek, Oza, , ,**

Mailing Address 455 S High St

City  
DenverState  
COZip Code  
80209-2631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Architect Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-334**

Amount of Each Receipt this Period

83.33

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

291.66

**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  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Klippel, Charles, H, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Deputy Genl Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-243**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**B. Klippel, Charles, H, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Deputy Genl Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-239**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**C. Knecht, Daniel, B, ,**

Mailing Address 110 Sullivan St  
6l

City  
New York

State  
NY

Zip Code  
10012-3654

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Clinical Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

459.25

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-3**

Amount of Each Receipt this Period

41.75

☐ Memo Item

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

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

875.07

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Knecht, Daniel, B, ,**

Mailing Address 110 Sullivan St  
6l

City  
New York

State  
NY

Zip Code  
10012-3654

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Clinical Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-3**

Amount of Each Receipt this Period

41.75

☐ Memo Item

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

**B. Knight, Margarette, E, ,**

Mailing Address 30019 Aldine Westfield Rd

City  
Spring

State  
TX

Zip Code  
77386-2995

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-420**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Knight, Margarette, E, ,**

Mailing Address 30019 Aldine Westfield Rd

City  
Spring

State  
TX

Zip Code  
77386-2995

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-415**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

91.75



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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Kobelt, Sharon, G, ,**

Mailing Address 3 Spencer Ct

City  
Clinton

State  
CT

Zip Code  
06413-2439

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Application Dvlp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 201811910297-293**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Koo, Ryan, , ,**

Mailing Address 7 Quail Ridge Ln

City  
Orinda

State  
CA

Zip Code  
94563-3445

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, NAT Market Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 201811910297-94**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Kost, Brian, J, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1833.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-559**

Amount of Each Receipt this Period

166.67

☐ Memo Item

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

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

206.67

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Kost, Brian, J, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.37

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-553**

Amount of Each Receipt this Period

166.67

☐ Memo Item

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

**B. Kral, Abby, , ,**

Mailing Address 161 W 16th St  
Apt 9A

City  
New York

State  
NY

Zip Code  
10011-6204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Network Product Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-309**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Kral, Abby, , ,**

Mailing Address 161 W 16th St  
Apt 9A

City  
New York

State  
NY

Zip Code  
10011-6204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Network Product Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-305**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

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

250.01

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Krause, Gregory, E, ,**

Mailing Address 5610 W Straight Arrow Ln

City  
Phoenix

State  
AZ

Zip Code  
85083-9313

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr App Software Del Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.63

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-205**

Amount of Each Receipt this Period

8.33

☐ Memo Item

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

**B. Krause, Gregory, E, ,**

Mailing Address 5610 W Straight Arrow Ln

City  
Phoenix

State  
AZ

Zip Code  
85083-9313

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr App Software Del Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.63

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-201**

Amount of Each Receipt this Period

8.33

☐ Memo Item

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

**C. Kunkel, Rodney, W, ,**

Mailing Address 2318 N Atwood Cir

City  
Mesa

State  
AZ

Zip Code  
85207-2490

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir,SgHd Actrl(Cred)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-83**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

66.66

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Kunkel, Rodney, W, ,**

Mailing Address 2318 N Atwood Cir

City  
Mesa

State  
AZ

Zip Code  
85207-2490

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, SgHd Actrl (Cred)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 201811910297-83**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Kunstmanas, Raymond, R, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Medical Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 201811910297-689**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Kwiatkowski, Cindy, J, ,**

Mailing Address 1510 S 93rd St

City  
Omaha

State  
NE

Zip Code  
68124-1233

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Mgr, Bus Proj Prog Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-349**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

95.00

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Kwiatkowski, Cindy, J, ,**

Mailing Address 1510 S 93rd St

City  
Omaha

State  
NE

Zip Code  
68124-1233

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Mgr, Bus Proj Prog Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 201811910297-344**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Lapinski, William, J, , Jr.**

Mailing Address 316 Boston Neck Rd

City  
Suffield

State  
CT

Zip Code  
06078-2304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, IT Prog Delvry

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 201811910297-442**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Lapolt, Heather, , ,**

Mailing Address 55 Blue Heron Dr

City  
East Hampton

State  
CT

Zip Code  
06424-1368

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Ntwrk & Dist Eng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.87

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-596**

Amount of Each Receipt this Period

29.17

☐ Memo Item

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

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

74.17

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

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

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

A. Lapolt, Heather, , ,

Mailing Address 55 Blue Heron Dr

City

East Hampton

State

CT

Zip Code

06424-1368

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Ntwrk &amp; Dist Eng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-590

Amount of Each Receipt this Period

29.17

☐ Memo Item

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

B. Lasaracino, David, M, ,

Mailing Address 14 Stiles Rd

City

Summit

State

NJ

Zip Code

07901-3319

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-590

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

C. Lasaracino, David, M, ,

Mailing Address 14 Stiles Rd

City

Summit

State

NJ

Zip Code

07901-3319

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-584

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

112.51

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

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Lask, Russell, J, ,**

Mailing Address 12 Long Lots Ln

City  
Westport

State  
CT

Zip Code  
06880-3822

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-168**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Lask, Russell, J, ,**

Mailing Address 12 Long Lots Ln

City  
Westport

State  
CT

Zip Code  
06880-3822

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-165**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Latorre, Jean, , ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Ch Invstm Offcr & LCP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-488**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

350.00

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Latorre, Jean, , ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Ch Invstm Ofcr & LCP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-482**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Laugherty, Kevin, D, ,**

Mailing Address 149 Kenyon St

City  
Hartford

State  
CT

Zip Code  
06105-2237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-376**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Laugherty, Kevin, D, ,**

Mailing Address 149 Kenyon St

City  
Hartford

State  
CT

Zip Code  
06105-2237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-371**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

300.00



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

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

FOR LINE NUMBER: PAGE 121 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Lawrence, John, A, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Public & Labor-East

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-467**

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**B. Lawrence, John, A, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Public & Labor-East

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-461**

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**C. Ledesma, Stephanie, E, ,**

Mailing Address 308 Drummers Ln

City  
Phoenixville

State  
PA

Zip Code  
19460-5636

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, MDCD Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

337.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-520**

Amount of Each Receipt this Period

37.50

☐ Memo Item

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

287.50

**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 PageFOR LINE NUMBER:  
(check only one)

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<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**

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

**A. Ledesma, Stephanie, E, ,**

Mailing Address 308 Drummers Ln

City  
PhoenixvilleState  
PAZip Code  
19460-5636FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, MDCD Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-514**

Amount of Each Receipt this Period

37.50

☐ Memo Item

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

**B. Lee, Ralph, A, ,**

Mailing Address 16 Daventry Hill Rd

City  
AvonState  
CTZip Code  
06001-2614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Ch Mindfulness Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Lee, Ralph, A, ,**

Mailing Address 16 Daventry Hill Rd

City  
AvonState  
CTZip Code  
06001-2614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Ch Mindfulness Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-4**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

237.50

**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:  
(check only one)

PAGE 123 OF 258

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

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

**A. Lee, Richard, , ,**

Mailing Address 12726 Alconbury St

City  
Cerritos

State  
CA

Zip Code  
90703-7213

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-540**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Lee, Richard, , ,**

Mailing Address 12726 Alconbury St

City  
Cerritos

State  
CA

Zip Code  
90703-7213

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-534**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Leonard, Richard, J, ,**

Mailing Address 676 V St

City  
King Of Prussia

State  
PA

Zip Code  
19406-2708

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Tech Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-589**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

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

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

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Leonard, Richard, J, ,**

Mailing Address 676 V St

City  
King Of Prussia

State  
PA

Zip Code  
19406-2708

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Tech Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-583**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Lessard, Rhonda, , ,**

Mailing Address 124 Homestead Dr

City  
South Windsor

State  
CT

Zip Code  
06074-2215

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medical Economics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-78**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Lessard, Rhonda, , ,**

Mailing Address 124 Homestead Dr

City  
South Windsor

State  
CT

Zip Code  
06074-2215

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medical Economics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-78**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

416.66

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Lewis, Larry, D, ,**

Mailing Address 4165 Bedford Ln

City  
Aurora

State  
IL

Zip Code  
60504-8429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-56**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Lewis, Larry, D, ,**

Mailing Address 4165 Bedford Ln

City  
Aurora

State  
IL

Zip Code  
60504-8429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-56**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Lichtenberger, Michael, S, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Finance Managing Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-176**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

225.00

# **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)

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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**

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

**A. Lichtenberger, Michael, S, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Finance Managing Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-173**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Lieber, Kurt, , ,**

Mailing Address 436 Upper Stewart Creek Road

City  
Etna

State  
WY

Zip Code  
83118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, CISO IT Infra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-482**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Lieber, Kurt, , ,**

Mailing Address 436 Upper Stewart Creek Road

City  
Etna

State  
WY

Zip Code  
83118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, CISO IT Infra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-476**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

191.66

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Logan, Steven, G, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Market Coach

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-267**

Amount of Each Receipt this Period

375.00

☐ Memo Item

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

**B. Logan, Steven, G, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Market Coach

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-263**

Amount of Each Receipt this Period

375.00

☐ Memo Item

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

**C. Lopes, Diane, , ,**

Mailing Address 11 Little Sorrel Ln

City  
Somers

State  
CT

Zip Code  
06071-2030

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Achiev Bus eXcellence

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-16**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 128 OF 258

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

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Lopes, Diane, , ,**

Mailing Address 11 Little Sorrel Ln

City  
Somers

State  
CT

Zip Code  
06071-2030

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Achiev Bus eXcellence

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-16**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Lopez, Rosse, Mary, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
IT SCRUM Master

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-676**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Lopez, Rosse, Mary, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
IT SCRUM Master

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-669**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

300.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 129 OF 258  
(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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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**

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

**A. Ludwig, Raymond, G, ,**

Mailing Address 1524 Friends Ln

City  
Maple GlenState  
PAZip Code  
19002-2812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Lead Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-170**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Ludwig, Raymond, G, ,**

Mailing Address 1524 Friends Ln

City  
Maple GlenState  
PAZip Code  
19002-2812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Lead Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-167**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Lynch, Karen, S, ,**

Mailing Address 28 Highwood Ln

City  
East FalmouthState  
MAZip Code  
02536-7914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-324**

Amount of Each Receipt this Period

416.66

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

516.66

**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 PageFOR LINE NUMBER: PAGE 130 OF 258  
(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**

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

**A. Lynch, Karen, S, ,**

Mailing Address 28 Highwood Ln

City  
East FalmouthState  
MAZip Code  
02536-7914FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-320**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**B. Macdonald, Stuart, F, ,**

Mailing Address 1804 Lexington Dr

City  
TroyState  
MIZip Code  
48084-5713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, PLS Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-720**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Macdonald, Stuart, F, ,**

Mailing Address 1804 Lexington Dr

City  
TroyState  
MIZip Code  
48084-5713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, PLS Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-712**

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

916.66

**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 131 OF 258

(check only one)

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

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

A. Maciuba, Marta, E, ,

Mailing Address 76 Grayville Rd

City  
AmstonState  
CTZip Code  
06231-1615FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Distrib Channel Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-600

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Maciuba, Marta, E, ,

Mailing Address 76 Grayville Rd

City  
AmstonState  
CTZip Code  
06231-1615FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Distrib Channel Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-594

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Macpherson, Shawn, M, ,

Mailing Address 3797 William Daves Rd

City  
DoylestownState  
PAZip Code  
18902-9191FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Medical Economics Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-579

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

141.67

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 132 OF 258

<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**

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

**A. Macpherson, Shawn, M, ,**

Mailing Address 3797 William Daves Rd

City  
DoylestownState  
PAZip Code  
18902-9191FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Medical Economics Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-573**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Macrae, Patricia, A, ,**

Mailing Address 14 Belcher Rd

City  
WethersfieldState  
CTZip Code  
06109-3001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, CorpPub Involmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-452**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Macrae, Patricia, A, ,**

Mailing Address 14 Belcher Rd

City  
WethersfieldState  
CTZip Code  
06109-3001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, CorpPub Involmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-446**

Amount of Each Receipt this Period

41.67

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

125.01

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 133 OF 258

<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**

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

**A. Maesaka, Alan, K, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-625**

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**B. Maesaka, Alan, K, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-618**

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**C. Magliano, Anthony, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Service Ops

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-670**

Amount of Each Receipt this Period

25.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 134 OF 258

<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**

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

**A. Magliano, Anthony, , ,**

Mailing Address 841 Colridge Rd

City  
WantaghState  
NYZip Code  
11793-1548FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-663**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Mahoney, Stephen, , ,**

Mailing Address 57 Tolland Farms Rd

City  
TollandState  
CTZip Code  
06084-3231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Corp Financial Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-72**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Mahoney, Stephen, , ,**

Mailing Address 57 Tolland Farms Rd

City  
TollandState  
CTZip Code  
06084-3231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Corp Financial Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-72**

Amount of Each Receipt this Period

83.33

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

191.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 135 OF 258

<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**

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

**A. Mantripragada, Prashant, , ,**

Mailing Address 66 Pheasant Chase

City  
West HartfordState  
CTZip Code  
06117-1031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Senior Engagement Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-18**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Mantripragada, Prashant, , ,**

Mailing Address 66 Pheasant Chase

City  
West HartfordState  
CTZip Code  
06117-1031FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Senior Engagement Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-18**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Marciano, Raul, , ,**

Mailing Address 1662 SW 132nd Way

City  
DavieState  
FLZip Code  
33325-5755FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, MMA Mkt Sls &amp; Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-319**

Amount of Each Receipt this Period

41.67

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

241.67

**TOTAL** This Period (last page this line number 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 OF 258

(check only one)

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

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

**A. Marcano, Raul, , ,**

Mailing Address 1662 SW 132nd Way

City  
Davie

State  
FL

Zip Code  
33325-5755

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, MMA Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-315**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Marcelo, Deanna, L, ,**

Mailing Address 2808 Videre Dr

City  
Wilmington

State  
DE

Zip Code  
19808-3673

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Ex Dir, Hlthcare Quality

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

958.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-411**

Amount of Each Receipt this Period

87.50

☐ Memo Item

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

**C. Marcelo, Deanna, L, ,**

Mailing Address 2808 Videre Dr

City  
Wilmington

State  
DE

Zip Code  
19808-3673

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Ex Dir, Hlthcare Quality

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

958.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-406**

Amount of Each Receipt this Period

87.50

☐ Memo Item

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

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

216.67



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 137 OF 258

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

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

**A. Marimon, Jorge, L, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Lead Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-113**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**B. Marimon, Jorge, L, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Lead Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-113**

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

**C. Markovich, Scott, R, ,**

Mailing Address 10 Old Barn Ln

City  
Guilford

State  
CT

Zip Code  
06437-5025

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, MDCD RFP & BD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-738**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

333.34

**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:  
(check only one)

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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**

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

**A. Markovich, Scott, R, ,**

Mailing Address 10 Old Barn Ln

City  
Guilford

State  
CT

Zip Code  
06437-5025

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, MD CD RFP & BD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-730**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Marsh, Brenda, G, ,**

Mailing Address 25722 Calafia Dr

City

Laguna Hills

State

CA

Zip Code

92653-5112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

DVV Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-664**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**c. Marsh, Brenda, G, ,**

Mailing Address 25722 Calafia Dr

City

Laguna Hills

State

CA

Zip Code

92653-5112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

DVV Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-657**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Martella, Kathleen, L, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Local Market

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-254**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Martella, Kathleen, L, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Local Market

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-250**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**C. Martino, Gregory, S, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-715**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

249.99

# **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  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Martino, Gregory, S, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-707**

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

**B. Matiski, Michelle, M, ,**

Mailing Address 8533 N 17th Pl

City  
Phoenix

State  
AZ

Zip Code  
85020-3318

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Legal Business Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-206**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**C. Matiski, Michelle, M, ,**

Mailing Address 8533 N 17th Pl

City  
Phoenix

State  
AZ

Zip Code  
85020-3318

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Legal Business Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-202**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

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

916.65

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. McCarthy, Margaret, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

EVP, Ops & Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-88**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**B. McCarthy, Margaret, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

EVP, Ops & Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-88**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**c. McClung, Peter, R, ,**

Mailing Address 11718 NE 75th PI

City  
Kirkland

State  
WA

Zip Code  
98033-8124

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, NAT Sales & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-707**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1083.32

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 142 OF 258  
(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**

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

**A. McDonald, Beverly, S, ,**

Mailing Address 2309 Maria Lynn Ct

City  
GastoniaState  
NCZip Code  
28056-7541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Mgr, Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-405**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. McDonald, Beverly, S, ,**

Mailing Address 2309 Maria Lynn Ct

City  
GastoniaState  
NCZip Code  
28056-7541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Mgr, Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-400**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. McDonough, Robert, S, ,**

Mailing Address 112 Cricket Knl

City  
WethersfieldState  
CTZip Code  
06109-3915FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, ClinPlcyRsrch/Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-542**

Amount of Each Receipt this Period

41.67

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

91.67

**TOTAL** 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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FOR LINE NUMBER: PAGE 143 OF 258

(check only one)

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

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

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

A. McDonough, Robert, S, ,

Mailing Address 112 Cricket Knl

City  
WethersfieldState  
CTZip Code  
06109-3915FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, ClinPlcyRsrch/Dev

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 2018111910297-536

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

B. McGinn, Patrick, T, ,

Mailing Address 315 Country Ln

City  
PhoenixvilleState  
PAZip Code  
19460-1713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP Natl Sls Svc Cons Rel

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.50

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-491

Amount of Each Receipt this Period

62.50

☐ Memo Item

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

C. McGinn, Patrick, T, ,

Mailing Address 315 Country Ln

City  
PhoenixvilleState  
PAZip Code  
19460-1713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP Natl Sls Svc Cons Rel

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

687.50

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 2018111910297-485

Amount of Each Receipt this Period

62.50

☐ Memo Item

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

166.67

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. McGlaun, Joy, , ,**

Mailing Address 4211 Alton PI NW

City  
Washington

State  
DC

Zip Code  
20016-2017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-43**

Amount of Each Receipt this Period

208.33

☐ Memo Item

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

**B. McGlaun, Joy, , ,**

Mailing Address 4211 Alton PI NW

City  
Washington

State  
DC

Zip Code  
20016-2017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-43**

Amount of Each Receipt this Period

208.33

☐ Memo Item

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

**C. McMorris, Peter, J, ,**

Mailing Address 656 Carpenters Way

City  
Horsham

State  
PA

Zip Code  
19044-1100

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
DVV Sr Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-308**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

441.66



# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. McMorris, Peter, J.,**

Mailing Address 656 Carpenters Way

City  
Horsham

State  
PA

Zip Code  
19044-1100

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

DVV Sr Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-304**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Meador, Mark, D.,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-667**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Meador, Mark, D.,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-660**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

# **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

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**

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

**A. Metcalfe, Kathryn, , ,**

Mailing Address 275 Hartshorn Dr

City  
Short Hills

State  
NJ

Zip Code  
07078-1916

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Enterprise Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-9**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**B. Metcalfe, Kathryn, , ,**

Mailing Address 275 Hartshorn Dr

City  
Short Hills

State  
NJ

Zip Code  
07078-1916

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Enterprise Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-9**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**C. Meyer, Diana, C, ,**

Mailing Address 12592 Oak Way Dr

City  
Los Alamitos

State  
CA

Zip Code  
90720-5225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, NAT Sales & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-116**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

858.32

# **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**

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

**A. Meyer, Diana, C, ,**

Mailing Address 12592 Oak Way Dr

City  
Los Alamitos

State  
CA

Zip Code  
90720-5225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, NAT Sales & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-116**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Meyer, Timothy, B, ,**

Mailing Address 37 Old Kings Hwy

City  
Wilton

State  
CT

Zip Code  
06897-3717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-234**

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**C. Meyer, Timothy, B, ,**

Mailing Address 37 Old Kings Hwy

City  
Wilton

State  
CT

Zip Code  
06897-3717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-230**

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

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

275.00

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

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

FOR LINE NUMBER:  
(check only one)

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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**

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

**A. Meyers, Timothy, J, ,**

Mailing Address 7427 Leawood St

City  
Papillion

State  
NE

Zip Code  
68046-4227

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Commercial Underwrtng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3025.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-442**

Amount of Each Receipt this Period

275.00

☐ Memo Item

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

**B. Meyers, Timothy, J, ,**

Mailing Address 7427 Leawood St

City  
Papillion

State  
NE

Zip Code  
68046-4227

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Commercial Underwrtng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3025.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-436**

Amount of Each Receipt this Period

275.00

☐ Memo Item

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

**C. Miller, Gregory, A, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Medical Hlth Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-148**

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)..... ►

650.00

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

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

FOR LINE NUMBER: PAGE 149 OF 258  
(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**

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

**A. Mirsky, Robert, S, ,**

Mailing Address 25 Chapel Pl  
Apt LO-1

City  
Great Neck

State  
NY

Zip Code  
11021-1407

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicare Medical Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2752.67

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-358**

Amount of Each Receipt this Period

250.25

☐ Memo Item

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

**B. Mirsky, Robert, S, ,**

Mailing Address 25 Chapel Pl  
Apt LO-1

City  
Great Neck

State  
NY

Zip Code  
11021-1407

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicare Medical Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2752.67

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-353**

Amount of Each Receipt this Period

250.25

☐ Memo Item

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

**C. Mitchem, Rebecca, J, ,**

Mailing Address 10414 Wittenberg Way

City  
Orlando

State  
FL

Zip Code  
32832-7023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Rx Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-157**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

550.50

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Mitchem, Rebecca, J, ,**

Mailing Address 10414 Wittenberg Way

City  
Orlando

State  
FL

Zip Code  
32832-7023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Rx Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-154**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Montross, Christopher, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Strategic Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-278**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Montross, Christopher, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Strategic Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-274**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

100.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

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

**A. Mooney, Kay, D, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Employee Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-458**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**B. Mooney, Kay, D, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Employee Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-452**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**C. Moore, Edith, R, ,**

Mailing Address 4306 Walden Terrace Ln

City  
Humble

State  
TX

Zip Code  
77396-4413

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.13

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-359**

Amount of Each Receipt this Period

20.83

☐ Memo Item

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

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

854.15

# **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  
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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Moore, Edith, R, ,

Mailing Address 4306 Walden Terrace Ln

City  
HumbleState  
TXZip Code  
77396-4413FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-354

Amount of Each Receipt this Period

20.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Moree, Margaret, M, ,

Mailing Address 14 S Washington St

City  
AthensState  
NYZip Code  
12015-1414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-312

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Moree, Margaret, M, ,

Mailing Address 14 S Washington St

City  
AthensState  
NYZip Code  
12015-1414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-308

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

420.83

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morgan, Charles, W, ,

Mailing Address 1025 Smith Ridge Rd

City  
New Canaan

State  
CT

Zip Code  
06840-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Finance Shared Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-20

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morgan, Charles, W, ,

Mailing Address 1025 Smith Ridge Rd

City  
New Canaan

State  
CT

Zip Code  
06840-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Finance Shared Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-20

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mortillaro, Jeffrey, J, ,

Mailing Address 23 Winterset Ln

City  
Simsbury

State  
CT

Zip Code  
06070-1720

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, InvOpRptg&LCPFin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-239

Amount of Each Receipt this Period

83.33

☐ Memo Item

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:  
(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mortillaro, Jeffrey, J.,**

Mailing Address 23 Winterset Ln

City  
Simsbury

State  
CT

Zip Code  
06070-1720

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, InvOpRptg&LCPFin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-235**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Mueller, Gail, A.,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr DB Admin Tech Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-471**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mueller, Gail, A.,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr DB Admin Tech Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-465**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

133.33

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Muller, Dawn, M, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-246**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Muller, Dawn, M, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-242**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Murphy, Louise, D, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Behavioral Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-117**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mustard, Diane, L, ,**

Mailing Address 7100 W Park Dr

City  
Adelphi

State  
MD

Zip Code  
20783-2756

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
MMA Sr Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-640**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Mustard, Diane, L, ,**

Mailing Address 7100 W Park Dr

City  
Adelphi

State  
MD

Zip Code  
20783-2756

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
MMA Sr Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-633**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nasby, Thomas, C, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Network Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-139**

Amount of Each Receipt this Period

125.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nasby, Thomas, C., ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Network Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-137**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Nazworth, Bryan, , ,**

Mailing Address 246 George Washington Hwy

City  
Ridgefield

State  
CT

Zip Code  
06877-1115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Internal Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nazworth, Bryan, , ,**

Mailing Address 246 George Washington Hwy

City  
Ridgefield

State  
CT

Zip Code  
06877-1115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Internal Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

625.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Neerman, Jason, R, ,**

Mailing Address 168 Stone Lake Dr

City  
Woodway

State  
TX

Zip Code  
76712-3200

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-50**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Neerman, Jason, R, ,**

Mailing Address 168 Stone Lake Dr

City  
Woodway

State  
TX

Zip Code  
76712-3200

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-50**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nettesheim, Brigitte, , ,**

Mailing Address 433 Cumnor Rd

City  
Kenilworth

State  
IL

Zip Code  
60043-1118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP Joint Ventures

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-122**

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)..... ►

266.66

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nettesheim, Brigitte, , ,**

Mailing Address 433 Cumnor Rd

City  
Kenilworth

State  
IL

Zip Code  
60043-1118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP Joint Ventures

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-121**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Neugebauer, John, E, ,**

Mailing Address 3150 Methacton Ave

City  
Norristown

State  
PA

Zip Code  
19403-1031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Ch Lit Offcr, Litigat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-587**

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Neugebauer, John, E, ,**

Mailing Address 3150 Methacton Ave

City  
Norristown

State  
PA

Zip Code  
19403-1031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Ch Lit Offcr, Litigat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-581**

Amount of Each Receipt this Period

416.66

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

933.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nichols, Michael, W, ,**

Mailing Address 49 Carriage Crossing Ln

City  
Middletown

State  
CT

Zip Code  
06457-5828

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, RE Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-515**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Nichols, Michael, W, ,**

Mailing Address 49 Carriage Crossing Ln

City  
Middletown

State  
CT

Zip Code  
06457-5828

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, RE Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-509**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nicholson, Peter, R, ,**

Mailing Address 1842 Palmerston Cir

City  
Ocoee

State  
FL

Zip Code  
34761-5115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
App Softwr Delivery Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-569**

Amount of Each Receipt this Period

40.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nicholson, Peter, R, ,**

Mailing Address 1842 Palmerston Cir

City  
Ocoee

State  
FL

Zip Code  
34761-5115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
App Softwr Delivery Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-563**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Noveck, Mark, S, ,**

Mailing Address 2214 Brookline Rd

City  
Wilmington

State  
DE

Zip Code  
19803-5222

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-318**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Noveck, Mark, S, ,**

Mailing Address 2214 Brookline Rd

City  
Wilmington

State  
DE

Zip Code  
19803-5222

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-314**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

206.66

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nowak, Stan, , ,**

Mailing Address 20 Woodholm Rd

City  
Manchester

State  
MA

Zip Code  
01944-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Member Engmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-41**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Nowak, Stan, , ,**

Mailing Address 20 Woodholm Rd

City  
Manchester

State  
MA

Zip Code  
01944-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Member Engmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-41**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nowroozi, Leila, , ,**

Mailing Address 1313 N Lynnbrook Dr

City  
Arlington

State  
VA

Zip Code  
22201-4918

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-24**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

583.33

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nowroozi, Leila, , ,**

Mailing Address 1313 N Lynnbrook Dr

City  
Arlington

State  
VA

Zip Code  
22201-4918

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-24**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Oades, Peter, R, ,**

Mailing Address 295 Westmont St

City  
West Hartford

State  
CT

Zip Code  
06117-2935

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Bond Portfolio Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-449**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Oades, Peter, R, ,**

Mailing Address 295 Westmont St

City  
West Hartford

State  
CT

Zip Code  
06117-2935

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Bond Portfolio Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-443**

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)..... ►

283.33

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Oldenburg, Amy, F, ,**

Mailing Address 7 Northridge Dr

City  
Burlington

State  
CT

Zip Code  
06013-1553

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Nwk Prod & BD Strat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.63

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-288**

Amount of Each Receipt this Period

208.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Oldenburg, Amy, F, ,**

Mailing Address 7 Northridge Dr

City  
Burlington

State  
CT

Zip Code  
06013-1553

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Nwk Prod & BD Strat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.63

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-284**

Amount of Each Receipt this Period

208.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**c. Osborn, Debra, S, ,**

Mailing Address 1245 Farmington Ave  
# 228

City  
West Hartford

State  
CT

Zip Code  
06107-2667

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, HRIT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-514**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

466.66

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Osborn, Debra, S, ,**

Mailing Address 1245 Farmington Ave  
# 228

City  
West Hartford

State  
CT

Zip Code  
06107-2667

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, HRIT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-508**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Osborne, Mary, Louise E, ,**

Mailing Address 234 Overbrook Rd

City  
Valencia

State  
PA

Zip Code  
16059-3028

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medicaid Region Head

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-562**

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Osborne, Mary, Louise E, ,**

Mailing Address 234 Overbrook Rd

City  
Valencia

State  
PA

Zip Code  
16059-3028

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medicaid Region Head

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-556**

Amount of Each Receipt this Period

416.66

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

883.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 166 OF 258

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Osowiecki, Noel, F, ,**

Mailing Address 21 Farmstead Ln

City  
Windsor

State  
CT

Zip Code  
06095-1834

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-109**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Osowiecki, Noel, F, ,**

Mailing Address 21 Farmstead Ln

City  
Windsor

State  
CT

Zip Code  
06095-1834

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-109**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Oxford, Martha, , ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Bus Project Program Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-262**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

108.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Oxford, Martha, , ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Bus Project Program Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-258**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Palmer, Nathaniel, B, ,**

Mailing Address 163 Butternut Ln

City  
Southington

State  
CT

Zip Code  
06489-3840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
IT Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-466**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Palmer, Nathaniel, B, ,**

Mailing Address 163 Butternut Ln

City  
Southington

State  
CT

Zip Code  
06489-3840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
IT Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-460**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Parker, David, C, ,**

Mailing Address 1695 Pinellas Bayway S  
Apt A4

City  
Tierra Verde

State  
FL

Zip Code  
33715-2540

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, TPA Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-316**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Parker, David, C, ,**

Mailing Address 1695 Pinellas Bayway S  
Apt A4

City  
Tierra Verde

State  
FL

Zip Code  
33715-2540

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, TPA Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-312**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Parker, Kim, , ,**

Mailing Address 6019 Williamsburg Way

City  
Tampa

State  
FL

Zip Code  
33625-4119

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr HR Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-268**

Amount of Each Receipt this Period

41.67

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

241.67



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Parker, Kim, , ,**

Mailing Address 6019 Williamsburg Way

City  
Tampa

State  
FL

Zip Code  
33625-4119

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr HR Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-264**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Passuello, Clifford, A, ,**

Mailing Address 1147 Jill Dr

City

Hummelstown

State  
PA

Zip Code  
17036-9004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-344**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Passuello, Clifford, A, ,**

Mailing Address 1147 Jill Dr

City

Hummelstown

State  
PA

Zip Code  
17036-9004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-339**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

141.67

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Pavlovich, Melissa, B, ,**

Mailing Address 95 Van Buren Ave

City  
West Hartford

State  
CT

Zip Code  
06107-3051

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Corporate Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-92**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pavlovich, Melissa, B, ,**

Mailing Address 95 Van Buren Ave

City  
West Hartford

State  
CT

Zip Code  
06107-3051

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Corporate Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-92**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Paz, Harold, L, ,**

Mailing Address 14 Surf Rd

City  
Westport

State  
CT

Zip Code  
06880-6731

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
EVP, Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.15

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-522**

Amount of Each Receipt this Period

416.65

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

583.31

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 171 OF 258  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Paz, Harold, L, ,**

Mailing Address 14 Surf Rd

City  
WestportState  
CTZip Code  
06880-6731FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
EVP, Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-516**

Amount of Each Receipt this Period

416.65

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pendleton, Evelyn, N, ,**

Mailing Address 2449 Harrisburg Pike

City  
LancasterState  
PAZip Code  
17601-1719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Market CFO & Coach

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-617**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pendleton, Evelyn, N, ,**

Mailing Address 2449 Harrisburg Pike

City  
LancasterState  
PAZip Code  
17601-1719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Market CFO & Coach

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-610**

Amount of Each Receipt this Period

83.33

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

583.31

**TOTAL** This Period (last page this line number 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 OF 258  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Peng, Kristin, M, ,**

Mailing Address 628 S County Line Rd

City  
Hinsdale

State  
IL

Zip Code  
60521-4657

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.33

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-441**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Peng, Kristin, M, ,**

Mailing Address 628 S County Line Rd

City  
Hinsdale

State  
IL

Zip Code  
60521-4657

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.33

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-435**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Peterson, Robin, B, ,**

Mailing Address 612 Miami Mnr

City  
Maumee

State  
OH

Zip Code  
43537-3756

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

PLS Sr Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-250**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

108.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Peterson, Robin, B, ,**

Mailing Address 612 Miami Mnr

City  
MaumeeState  
OHZip Code  
43537-3756FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

PLS Sr Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-246**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Picaso, Lisa, G, ,**

Mailing Address 7300 S Camino Mirlo

City  
TucsonState  
AZZip Code  
85747-9339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-354**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Picaso, Lisa, G, ,**

Mailing Address 7300 S Camino Mirlo

City  
TucsonState  
AZZip Code  
85747-9339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-349**

Amount of Each Receipt this Period

25.00

☐ Memo Item**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:  
(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Picken, Andrew, J, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Senior Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-150**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Picken, Andrew, J, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Senior Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-147**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pillinger, Deborah, I, ,**

Mailing Address 1055 Anthony Wayne Dr

City  
Warminster

State  
PA

Zip Code  
18974-2601

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Reg Affairs, Ops&Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-683**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**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 PageFOR LINE NUMBER:  
(check only one)

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<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Pillinger, Deborah, I, ,**

Mailing Address 1055 Anthony Wayne Dr

City  
WarminsterState  
PAZip Code  
18974-2601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Reg Affairs, Ops&amp;Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-676**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Porter, Douglas, W, ,**

Mailing Address 5 Groff Rd

City  
AnnvilleState  
PAZip Code  
17003-8514FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

SVP, Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-383**

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Porter, Douglas, W, ,**

Mailing Address 5 Groff Rd

City  
AnnvilleState  
PAZip Code  
17003-8514FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

SVP, Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-378**

Amount of Each Receipt this Period

416.66

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

1083.32

**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 176 OF 258  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Potter, Thomas, L, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Portfolio Mgmt Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-77**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Potter, Thomas, L, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Portfolio Mgmt Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-77**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Prince, Maria, , ,**

Mailing Address 7745 Tilghman St

City  
Fulton

State  
MD

Zip Code  
20759-2547

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-601**

Amount of Each Receipt this Period

41.67

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

91.67



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Prince, Maria, , ,**

Mailing Address 7745 Tilghman St

City  
Fulton

State  
MD

Zip Code  
20759-2547

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-595**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pyneni, Krishna, K, ,**

Mailing Address 64 Florence Way

City  
Farmington

State  
CT

Zip Code  
06032-3409

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Application Dvlpmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-33**

Amount of Each Receipt this Period

20.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pyneni, Krishna, K, ,**

Mailing Address 64 Florence Way

City  
Farmington

State  
CT

Zip Code  
06032-3409

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Application Dvlpmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-33**

Amount of Each Receipt this Period

20.83

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

83.33

# **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  
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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pypiak, Nicholas, J, ,

Mailing Address 105 E 6th St

City

Lititz

State

PA

Zip Code

17543-2924

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Bus Unit UW

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-322

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pypiak, Nicholas, J, ,

Mailing Address 105 E 6th St

City

Lititz

State

PA

Zip Code

17543-2924

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Bus Unit UW

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 2018111910297-318

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quinones, Demmie, , ,

Mailing Address 3441 W 53rd Pl

City

Chicago

State

IL

Zip Code

60632-3201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr App Software Del Advsr

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 2018111910297-328

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Reddington, Phyllis, , ,**

Mailing Address 15 Meadowview Dr

City  
East Windsor

State  
NJ

Zip Code  
08512-3009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-678**

Amount of Each Receipt this Period

20.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Reddington, Phyllis, , ,**

Mailing Address 15 Meadowview Dr

City  
East Windsor

State  
NJ

Zip Code  
08512-3009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-671**

Amount of Each Receipt this Period

20.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Reinecke, Davin, H, ,**

Mailing Address 930 Carriage Circle Ln  
Apt F

City  
Saint Louis

State  
MO

Zip Code  
63122-7502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-311**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

124.99

**TOTAL** This Period (last page this line number 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 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Reinecke, Davin, H, ,**

Mailing Address 930 Carriage Circle Ln  
Apt F

City  
Saint Louis

State  
MO

Zip Code  
63122-7502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-307**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Remick, Justin, R, ,**

Mailing Address 2664 Shady Ln

City  
Pottstown

State  
PA

Zip Code  
19464-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, INT AmerGovPlns

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-660**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Remick, Justin, R, ,**

Mailing Address 2664 Shady Ln

City  
Pottstown

State  
PA

Zip Code  
19464-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, INT AmerGovPlns

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-653**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

133.33

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ricciuti, James, R, ,**

Mailing Address 1830 S St NW

City  
Washington

State  
DC

Zip Code  
20009-6244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Govt Rel Strat & Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-326**

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ricciuti, James, R, ,**

Mailing Address 1830 S St NW

City  
Washington

State  
DC

Zip Code  
20009-6244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Govt Rel Strat & Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-322**

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rivera, Emma, , ,**

Mailing Address 25 Story Ct

City  
Bayonne

State  
NJ

Zip Code  
07002-2434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Network Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-612**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

916.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rivera, Emma, , ,**

Mailing Address 25 Story Ct

City  
Bayonne

State  
NJ

Zip Code  
07002-2434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Network Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-605**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Roach, Timothy, J, ,**

Mailing Address 1105 Meadow Mist Rd

City  
Middleton

State  
WI

Zip Code  
53562-5625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-533**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Roach, Timothy, J, ,**

Mailing Address 1105 Meadow Mist Rd

City  
Middleton

State  
WI

Zip Code  
53562-5625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-527**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

583.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Roberts, Alan, M, ,**

Mailing Address 157 Windmill Hill Rd S

City  
PutneyState  
VTZip Code  
05346-9258FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Star Ratings

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-314**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Roberts, Alan, M, ,**

Mailing Address 157 Windmill Hill Rd S

City  
PutneyState  
VTZip Code  
05346-9258FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Star Ratings

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-310**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Roberts, Kenneth, M, ,**

Mailing Address 138 Flynt St

City  
PalmerState  
MAZip Code  
01069-1682FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
IT Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-87**

Amount of Each Receipt this Period

83.33

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

166.67

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Roberts, Kenneth, M, ,**

Mailing Address 138 Flynt St

City  
PalmerState  
MAZip Code  
01069-1682FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

IT Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-87**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Robino, Steven, L, ,**

Mailing Address 11207 NE 127th Ave

City  
VancouverState  
WAZip Code  
98682-1783FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-407**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rocco, Robert, P, ,**

Mailing Address 144 Silver Creek Dr

City  
SuffieldState  
CTZip Code  
06078-1252FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Alternate Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-114**

Amount of Each Receipt this Period

41.67

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

145.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 185 OF 258

<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rocco, Robert, P, ,**

Mailing Address 144 Silver Creek Dr

City  
SuffieldState  
CTZip Code  
06078-1252FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Alternate Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 201811910297-114**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Roddenberry, Michele, A, ,**

Mailing Address 32098 Camino Nunez

City  
TemeculaState  
CAZip Code  
92592-6342FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

MMA Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 201811910297-492**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rodichok, Steven, W, ,**

Mailing Address 302 N Beverly Ln

City  
Arlington HeightsState  
ILZip Code  
60004-6243FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Application Dvlpmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-391**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

161.67

**TOTAL** This Period (last page this line number 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 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rodichok, Steven, W, ,**

Mailing Address 302 N Beverly Ln

City  
Arlington Heights

State  
IL

Zip Code  
60004-6243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Application Dvlpmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-386**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rogers, Lee, M, ,**

Mailing Address 3606 Golfview Dr

City  
Mechanicsburg

State  
PA

Zip Code  
17050-2216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
App Softwr Delivery Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-388**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rogers, Lee, M, ,**

Mailing Address 3606 Golfview Dr

City  
Mechanicsburg

State  
PA

Zip Code  
17050-2216

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
App Softwr Delivery Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-383**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

266.66

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rooney, Jon, F, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Hedge Fund Invest Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-186**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rooney, Jon, F, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Hedge Fund Invest Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-182**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rotay, David, C, ,**

Mailing Address 2024 Greenes Way Cir

City  
Collegeville

State  
PA

Zip Code  
19426-3154

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Bus Unit UW

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-580**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rotay, David, C, ,**

Mailing Address 2024 Greenes Way Cir

City  
Collegeville

State  
PA

Zip Code  
19426-3154

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, Bus Unit UW

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-574**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rottman, Jason, , ,**

Mailing Address 1101 E Hector St  
Unit 237

City  
Conshohocken

State  
PA

Zip Code  
19428-2425

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medicaid Hlth Plan I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-209**

Amount of Each Receipt this Period

275.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rottman, Jason, , ,**

Mailing Address 1101 E Hector St  
Unit 237

City  
Conshohocken

State  
PA

Zip Code  
19428-2425

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medicaid Hlth Plan I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-205**

Amount of Each Receipt this Period

275.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 189 OF 258  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Routh, James, M, ,**

Mailing Address 193 Bristol Rd

City  
WellesleyState  
MAZip Code  
02481-2602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP Chief Security Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-439**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Routh, James, M, ,**

Mailing Address 193 Bristol Rd

City  
WellesleyState  
MAZip Code  
02481-2602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP Chief Security Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-433**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Ryan, Suzanne, C, ,**

Mailing Address 49 Gate Ridge Rd

City  
EastonState  
CTZip Code  
06612-1836FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, Bus Consultation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

962.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-64**

Amount of Each Receipt this Period

87.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

587.50

**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 190 OF 258  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ryan, Suzanne, C, ,**

Mailing Address 49 Gate Ridge Rd

City  
Easton

State  
CT

Zip Code  
06612-1836

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Bus Consultation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

962.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-64**

Amount of Each Receipt this Period

87.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Saba, Stephanie, S, ,**

Mailing Address 4650 E Camelback Rd

City  
Phoenix

State  
AZ

Zip Code  
85018-2828

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, MDCD Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-210**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Saba, Stephanie, S, ,**

Mailing Address 4650 E Camelback Rd

City  
Phoenix

State  
AZ

Zip Code  
85018-2828

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, MDCD Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-206**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

254.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sabatino, Thomas, J, ,**Mailing Address 1030 3rd Ave S  
Unit 410City  
NaplesState  
FLZip Code  
34102-6485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
EVP, General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-10**

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sabatino, Thomas, J, ,**Mailing Address 1030 3rd Ave S  
Unit 410City  
NaplesState  
FLZip Code  
34102-6485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
EVP, General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-10**

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sanborn, Rebecca, A, ,**Mailing Address 139 Harriman Point Rd  
Po Box 62City  
BrooklinState  
MEZip Code  
04616-3207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, Medical Mgmt Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-424**

Amount of Each Receipt this Period

100.00

☐ Memo Item**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 192 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sanborn, Rebecca, A, ,**

Mailing Address 139 Harriman Point Rd  
Po Box 62

City  
Brooklin

State  
ME

Zip Code  
04616-3207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Medical Mgmt Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-419**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Santolini, Cecily, A, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Senior Business Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-75**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Santolini, Cecily, A, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Senior Business Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-75**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 193 OF 258

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Santos, Mark, C, ,**

Mailing Address 31 Hawthorne Cir

City  
Rocky Hill

State  
CT

Zip Code  
06067-3657

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-112**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Santos, Mark, C, ,**

Mailing Address 31 Hawthorne Cir

City  
Rocky Hill

State  
CT

Zip Code  
06067-3657

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-112**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sardak, Borislava, , ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Application Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-119**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

241.66

**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 194 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sardak, Borislava, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Application Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 201811910297-118**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Scherr, Daniel, B, ,**

Mailing Address 4679 Shelley Ln

City  
Ellicott City

State  
MD

Zip Code  
21043-6772

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

SrDir,FinRptg&Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 201811910297-420**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Schild, Molly, A, ,**

Mailing Address 131 E Davie St  
Apt 520

City  
Raleigh

State  
NC

Zip Code  
27601-3054

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Medicare GM I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

990.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-57**

Amount of Each Receipt this Period

90.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

185.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 195 OF 258

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schild, Molly, A, ,**

Mailing Address 131 E Davie St  
Apt 520

City  
Raleigh

State  
NC

Zip Code  
27601-3054

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Medicare GM I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-57**

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Schmidt, Mark, W, ,**

Mailing Address 3630 Berger Rd

City  
Lutz

State  
FL

Zip Code  
33548-4703

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP,TPA&Payer Solutions,WC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-197**

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Schmidt, Mark, W, ,**

Mailing Address 3630 Berger Rd

City  
Lutz

State  
FL

Zip Code  
33548-4703

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP,TPA&Payer Solutions,WC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-193**

Amount of Each Receipt this Period

416.66

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

923.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 OF 258  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Scholvinck, Carolyn, P, ,**

Mailing Address 10031 Sprit Cir

City  
Huntington Beach

State  
CA

Zip Code  
92646-7402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Application Dvlp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-380**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Scholvinck, Carolyn, P, ,**

Mailing Address 10031 Sprit Cir

City  
Huntington Beach

State  
CA

Zip Code  
92646-7402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Application Dvlp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-375**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Schulman, Darren, J, ,**

Mailing Address 1285 Falling Star Ave

City  
Westlake Village

State  
CA

Zip Code  
91362-5232

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Public & Labor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-695**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

333.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schulman, Darren, J, ,**

Mailing Address 1285 Falling Star Ave

City

Westlake Village

State

CA

Zip Code

91362-5232

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Public & Labor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-688**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Schulz, Fred, A, ,**

Mailing Address 535 Country Club Rd

City

Phoenixville

State

PA

Zip Code

19460-5706

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicare Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-334**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Schulz, Fred, A, ,**

Mailing Address 535 Country Club Rd

City

Phoenixville

State

PA

Zip Code

19460-5706

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicare Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-329**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schwartz, John, W, ,

Mailing Address 111 Mary Ambler Way

City  
AmblerState  
PAZip Code  
19002-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-561

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwartz, John, W, ,

Mailing Address 111 Mary Ambler Way

City  
AmblerState  
PAZip Code  
19002-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-555

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Scott, K., Lynn, ,

Mailing Address PO Box 271468

City  
TampaState  
FLZip Code  
33688-1468FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Market Exec Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-190

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

180.00

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:  
(check only one)

PAGE 199 OF 258

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Scott, K., Lynn, ,**

Mailing Address PO Box 271468

City  
Tampa

State  
FL

Zip Code  
33688-1468

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market Exec Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-186**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sevillano, Sergio, , ,**

Mailing Address 23 Fairwood Farms Dr

City

West Hartford

State

CT

Zip Code

06107-3502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

App Softwr Delivery Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-279**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sevillano, Sergio, , ,**

Mailing Address 23 Fairwood Farms Dr

City

West Hartford

State

CT

Zip Code

06107-3502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

App Softwr Delivery Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-275**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Shanahan-Richards, Wendy, A, ,**

Mailing Address 728 W Jackson Blvd  
Apt 412

City  
Chicago

State  
IL

Zip Code  
60661-5304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Senior Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 201811910297-196**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Shanok, Rachel, L, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Mgr, Quality Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 201811910297-725**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sharlow, Tracey, , ,**

Mailing Address 186 Southpond Rd

City  
South Glastonbury

State  
CT

Zip Code  
06073-2325

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Rx Mkt Sls & Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-105**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

123.33

**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 201 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sharlow, Tracey, , ,**

Mailing Address 186 Southpond Rd

City

South Glastonbury

State

CT

Zip Code

06073-2325

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Rx Mkt Sls & Svc

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-105**

Amount of Each Receipt this Period

83.33



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Shepherd, Virginia, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

MMA Sr Sales Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-719**

Amount of Each Receipt this Period

166.67



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Shepherd, Virginia, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

MMA Sr Sales Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1833.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-711**

Amount of Each Receipt this Period

166.67



Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

416.67

**TOTAL** This Period (last page this line number 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 OF 258  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Simmons, Jacqueline, R, ,**

Mailing Address 3350 SW 27th Ave

City  
Miami

State  
FL

Zip Code  
33133-5325

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Clin Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-661**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Simmons, Jacqueline, R, ,**

Mailing Address 3350 SW 27th Ave

City  
Miami

State  
FL

Zip Code  
33133-5325

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Clin Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-654**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Simpson, Patricia, G, ,**

Mailing Address 258 Sugar Pine Dr

City  
Middletown

State  
DE

Zip Code  
19709-9775

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-212**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

166.67

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 OF 258  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Simpson, Patricia, G, ,**

Mailing Address 258 Sugar Pine Dr

City  
Middletown

State  
DE

Zip Code  
19709-9775

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-208**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Slawter, Regina, M, ,**

Mailing Address 1821 Beam Dr

City  
Southlake

State  
TX

Zip Code  
76092-3455

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Field Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-487**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Slawter, Regina, M, ,**

Mailing Address 1821 Beam Dr

City  
Southlake

State  
TX

Zip Code  
76092-3455

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Field Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-481**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

249.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 204 OF 258

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Smith, Kelli, , ,**

Mailing Address 4627 E Buist Ave

City  
Phoenix

State  
AZ

Zip Code  
85044-5531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, FP&A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-606**

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Smith, Kelli, , ,**

Mailing Address 4627 E Buist Ave

City  
Phoenix

State  
AZ

Zip Code  
85044-5531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Exec Dir, FP&A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-599**

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Snyder, Karen, L, ,**

Mailing Address 16 Bonnywick Dr

City  
Harrisburg

State  
PA

Zip Code  
17111-4932

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-363**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

213.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 205 OF 258

<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Snyder, Karen, L., ,**

Mailing Address 16 Bonnywick Dr

City  
HarrisburgState  
PAZip Code  
17111-4932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, Service Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-358**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Snyder Demaio, Jane, , ,**

Mailing Address 148 Dug Rd

City  
S GlastonburyState  
CTZip Code  
06073-2001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP Inst ABX Strat Executn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-257**

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Snyder Demaio, Jane, , ,**

Mailing Address 148 Dug Rd

City  
S GlastonburyState  
CTZip Code  
06073-2001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP Inst ABX Strat Executn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-253**

Amount of Each Receipt this Period

416.66

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

916.65

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 206 OF 258  
(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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Soistman, Francis, S, ,**

Mailing Address 14925 Finegan Farm Dr

City  
DarnestownState  
MDZip Code  
20874-3605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
EVP, Government Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-343**

Amount of Each Receipt this Period

416.65

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Soistman, Francis, S, ,**

Mailing Address 14925 Finegan Farm Dr

City  
DarnestownState  
MDZip Code  
20874-3605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
EVP, Government Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-338**

Amount of Each Receipt this Period

416.65

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Spann, Margaret, A, ,**

Mailing Address 54 Lawn Ave

City  
PortlandState  
MEZip Code  
04103-3133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Sr Dir, Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-637**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

858.30

**TOTAL** This Period (last page this line number 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 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Spann, Margaret, A, ,

Mailing Address 54 Lawn Ave

City  
PortlandState  
MEZip Code  
04103-3133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-630

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Spettell, Claire, M, ,

Mailing Address 41 Smallwood Rd

City  
West HartfordState  
CTZip Code  
06107-3449FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Data Science

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-558

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Spettell, Claire, M, ,

Mailing Address 41 Smallwood Rd

City  
West HartfordState  
CTZip Code  
06107-3449FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Data Science

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-552

Amount of Each Receipt this Period

50.00

☐ Memo Item

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 PageFOR LINE NUMBER: PAGE 208 OF 258  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Spradlin, Scott, L, ,**

Mailing Address 17756 Greystone Terrace Dr

City  
WildwoodState  
MOZip Code  
63005-4225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Chief Med Offcr, LRB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-414**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Spradlin, Scott, L, ,**

Mailing Address 17756 Greystone Terrace Dr

City  
WildwoodState  
MOZip Code  
63005-4225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, Chief Med Offcr, LRB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-409**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Spring, William, C, ,**

Mailing Address 32 Gordon Rd

City  
NeedhamState  
MAZip Code  
02492-3020FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-32**

Amount of Each Receipt this Period

41.67

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

541.67

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 209 OF 258

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Spring, William, C, ,**

Mailing Address 32 Gordon Rd

City  
Needham

State  
MA

Zip Code  
02492-3020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-32**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stanton, Dwayne, T, ,**

Mailing Address 11624 Kingsley Manor Way

City  
Jacksonville

State  
FL

Zip Code  
32225-1066

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-656**

Amount of Each Receipt this Period

20.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stanton, Dwayne, T, ,**

Mailing Address 11624 Kingsley Manor Way

City  
Jacksonville

State  
FL

Zip Code  
32225-1066

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-649**

Amount of Each Receipt this Period

20.83

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

83.33

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stelben, John, J, ,**

Mailing Address 19416 Pyrite Ln

City  
Brookeville

State  
MD

Zip Code  
20833-2231

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3666.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-443**

Amount of Each Receipt this Period

333.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stelben, John, J, ,**

Mailing Address 19416 Pyrite Ln

City  
Brookeville

State  
MD

Zip Code  
20833-2231

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3666.63

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-437**

Amount of Each Receipt this Period

333.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stenson, John, , ,**

Mailing Address 63 Penn Dr

City  
West Hartford

State  
CT

Zip Code  
06119-1153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Corp Act, UW, Med Econ

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-489**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

916.66

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 211 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stenson, John, , ,**

Mailing Address 63 Penn Dr

City  
West Hartford

State  
CT

Zip Code  
06119-1153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Corp Act, UW,Med Econ

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-483**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stetz, Lori, C, ,**

Mailing Address 6 Crosstrees Hill Rd

City  
Essex

State  
CT

Zip Code  
06426-1420

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Medical Hlth Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-237**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stetz, Lori, C, ,**

Mailing Address 6 Crosstrees Hill Rd

City  
Essex

State  
CT

Zip Code  
06426-1420

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Medical Hlth Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-233**

Amount of Each Receipt this Period

41.67

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

333.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 212 OF 258

<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stevens, Greg, E, ,**

Mailing Address 13341 Tiburon Way

City  
TustinState  
CAZip Code  
92782-8616FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP,NtlNwk Strat Territory

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-486**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stevens, Greg, E, ,**

Mailing Address 13341 Tiburon Way

City  
TustinState  
CAZip Code  
92782-8616FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP,NtlNwk Strat Territory

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-480**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stewart, Holly, , ,**

Mailing Address 214 Legend Dr

City  
San AntonioState  
TXZip Code  
78260-3586FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

MMA Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-393**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

186.66

**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 213 OF 258

(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Strickland, Pamela, L, ,**

Mailing Address 149 Holly Berry Ln

City  
JacksonvilleState  
FLZip Code  
32259-8897FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Exec Dir, Performance Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 201811910297-685**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Strubert, Christopher, B, ,**Mailing Address 5669 N Fresno St  
Apt 167City  
FresnoState  
CAZip Code  
93710-8312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Senior Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 201811910297-176**

Amount of Each Receipt this Period

20.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stuart, Duncan, , ,**

Mailing Address 78 Mayflower Dr

City  
North AndoverState  
MAZip Code  
01845-6229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
Exec Dir, S&A Mgt, AHM&HDMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-91**

Amount of Each Receipt this Period

83.33

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

124.16

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 214 OF 258

<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stuart, Duncan, , ,**

Mailing Address 78 Mayflower Dr

City

North Andover

State

MA

Zip Code

01845-6229

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir,S&amp;A Mgt,AHM&amp;HDMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-91**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sura, Christopher, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Systems Engineerg Adv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-527**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sura, Christopher, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Systems Engineerg Adv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 2018111910297-521**

Amount of Each Receipt this Period

50.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 215 OF 258

<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Swanson, Terri, A, ,**

Mailing Address 211 N Beacon St

City  
HartfordState  
CTZip Code  
06105-2246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, MDCR Product &amp; Part D

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3208.37

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-167**

Amount of Each Receipt this Period

291.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Swanson, Terri, A, ,**

Mailing Address 211 N Beacon St

City  
HartfordState  
CTZip Code  
06105-2246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, MDCR Product &amp; Part D

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3208.37

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-164**

Amount of Each Receipt this Period

291.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sweatland, Timothy, G, ,**

Mailing Address 290 N Grand St

City  
West SuffieldState  
CTZip Code  
06093-3402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, IT Program Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-274**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

633.34

**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 216 OF 258  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sweatland, Timothy, G, ,**

Mailing Address 290 N Grand St

City  
West Suffield

State  
CT

Zip Code  
06093-3402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, IT Program Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-270**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sweatt, Kathy, , ,**

Mailing Address 1005 Elm Dr

City  
Greenbrier

State  
TN

Zip Code  
37073-4659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Provider Data Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-390**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tadlock, Celynda, G, ,**

Mailing Address 4763 Freeport Bay NE

City  
Roswell

State  
GA

Zip Code  
30075-5748

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Phrm CstOfCare, ClSvc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-421**

Amount of Each Receipt this Period

125.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

195.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 OF 258

(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Tadlock, Celynda, G, ,**

Mailing Address 4763 Freeport Bay NE

City  
RoswellState  
GAZip Code  
30075-5748FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Phrm CstOfCare, ClSvc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-416**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tambellini, Robert, L, ,**

Mailing Address 722 Mallard St

City  
MillvilleState  
NJZip Code  
08332-2313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Tax Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	16	2018

**Transaction ID : 2018111910297-679**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Timm, Jay, E, ,**

Mailing Address 5943 Penwood Dr

City  
WadsworthState  
OHZip Code  
44281-8007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir Govt Pgms Ntwk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	19	2018

**Transaction ID : 2018102211216-535**

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

395.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Timm, Jay, E, ,**

Mailing Address 5943 Penwood Dr

City  
Wadsworth

State  
OH

Zip Code  
44281-8007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir Govt Pgms Ntwk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-529**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tiner, Brooke, F, ,**

Mailing Address 814 E 7th Ave

City  
Tallahassee

State  
FL

Zip Code  
32303-5704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-723**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tiner, Brooke, F, ,**

Mailing Address 814 E 7th Ave

City  
Tallahassee

State  
FL

Zip Code  
32303-5704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Govt Relations Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-715**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Tolson, Russell, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Informatics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-728**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tolson, Russell, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, Informatics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-720**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tuberty, Brian, L, ,**

Mailing Address 3490 Pond View Dr

City  
Chalfont

State  
PA

Zip Code  
18914-4400

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, IT Program Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-575**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Tuberty, Brian, L, ,**

Mailing Address 3490 Pond View Dr

City  
Chalfont

State  
PA

Zip Code  
18914-4400

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, IT Program Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-569**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Twachtman, Erich, T, ,**

Mailing Address 25 Lt Shubael Rd

City  
Higganum

State  
CT

Zip Code  
06441-4142

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP Natl Sls Svc Cons Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-506**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Twachtman, Erich, T, ,**

Mailing Address 25 Lt Shubael Rd

City  
Higganum

State  
CT

Zip Code  
06441-4142

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP Natl Sls Svc Cons Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-500**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

191.66

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ulibarri, Francisco, L, ,**

Mailing Address 220 Mars Hill Rd

City

Powder Springs

State

GA

Zip Code

30127-4307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-400**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ulibarri, Francisco, L, ,**

Mailing Address 220 Mars Hill Rd

City

Powder Springs

State

GA

Zip Code

30127-4307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-395**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**c. Un, Hyong, , ,**

Mailing Address 5101 Harmony Ct

City

Doylestown

State

PA

Zip Code

18902-1468

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, EAP & Chf Psych Offcr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-736**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Un, Hyong, , ,**

Mailing Address 5101 Harmony Ct

City  
Doylestown

State  
PA

Zip Code  
18902-1468

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, EAP & Chf Psych Offcr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-728**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ursini, Louis, E, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP Enterprise IT Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3208.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-286**

Amount of Each Receipt this Period

291.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Ursini, Louis, E, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP Enterprise IT Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3208.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-282**

Amount of Each Receipt this Period

291.67

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

833.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Vance, Jennifer, , ,**

Mailing Address 735 Sherwood Dr

City  
Troy

State  
OH

Zip Code  
45373-6712

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Lead Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-14**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Vance, Jennifer, , ,**

Mailing Address 735 Sherwood Dr

City  
Troy

State  
OH

Zip Code  
45373-6712

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Lead Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-14**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Waggoner, Richard, E, ,**

Mailing Address 201 Winburn Ln

City  
Franklin

State  
TN

Zip Code  
37069-4103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Actuarial Director (Cred)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-440**

Amount of Each Receipt this Period

20.83

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Waggoner, Richard, E, ,**

Mailing Address 201 Winburn Ln

City  
Franklin

State  
TN

Zip Code  
37069-4103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Actuarial Director (Cred)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-434**

Amount of Each Receipt this Period

20.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wahl, Gwendolyn, , ,**

Mailing Address 11 Sterling Dr

City  
Westport

State  
CT

Zip Code  
06880-6629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Enterprise Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-429**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wahl, Gwendolyn, , ,**

Mailing Address 11 Sterling Dr

City  
Westport

State  
CT

Zip Code  
06880-6629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Enterprise Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-424**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

520.83



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Waldor, Philip, A, ,**

Mailing Address 210 Berkshire Ave

City  
Linwood

State  
NJ

Zip Code  
08221-2311

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-213**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Waldor, Philip, A, ,**

Mailing Address 210 Berkshire Ave

City  
Linwood

State  
NJ

Zip Code  
08221-2311

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-209**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Walker, Jean, H, ,**

Mailing Address 26 Avonridge

City  
Avon

State  
CT

Zip Code  
06001-4039

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Actuarial & UW- GVT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-60**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

333.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Walker, Jean, H, ,**

Mailing Address 26 Avonridge

City  
Avon

State  
CT

Zip Code  
06001-4039

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Actuarial & UW- GVT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-60**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Walker, Robert, S, ,**

Mailing Address 185 Paper Mill Rd

City

Marlborough

State

CT

Zip Code

06447-1278

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, CFO Institutional Bus

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-39**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Walker, Robert, S, ,**

Mailing Address 185 Paper Mill Rd

City

Marlborough

State

CT

Zip Code

06447-1278

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, CFO Institutional Bus

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-39**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 227 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wall, Jerome, J.,**

Mailing Address 8511 Breezewood Dr

City  
Pittsburgh

State  
PA

Zip Code  
15237-4120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

MMA Sr Sales Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-388**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Walsh, Catherine, B.,**

Mailing Address 46 Great Pond Rd

City  
South Glastonbury

State  
CT

Zip Code  
06073-3100

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-505**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Walsh, Catherine, B.,**

Mailing Address 46 Great Pond Rd

City  
South Glastonbury

State  
CT

Zip Code  
06073-3100

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-499**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wankum, Teresa, , ,**

Mailing Address 400 Appian Way

City  
DoylestownState  
PAZip Code  
18901-2046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP Clin Svcs & Plat Sol

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-658**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wankum, Teresa, , ,**

Mailing Address 400 Appian Way

City  
DoylestownState  
PAZip Code  
18901-2046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP Clin Svcs & Plat Sol

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-651**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Warrington, Justin, J, ,**

Mailing Address 25 Longwood Dr

City  
StratfordState  
NJZip Code  
08084-1917FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.Occupation (for Individual)  
VP, CFO Commercial Bus

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-649**

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

750.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 229 OF 258

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Warrington, Justin, J, ,**

Mailing Address 25 Longwood Dr

City  
Stratford

State  
NJ

Zip Code  
08084-1917

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, CFO Commercial Bus

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-642**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Washington, Barbara, E, ,**

Mailing Address 4113 Leland St

City  
Chevy Chase

State  
MD

Zip Code  
20815-5033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2772.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-444**

Amount of Each Receipt this Period

252.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Washington, Barbara, E, ,**

Mailing Address 4113 Leland St

City  
Chevy Chase

State  
MD

Zip Code  
20815-5033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2772.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-438**

Amount of Each Receipt this Period

252.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

754.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 OF 258  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Washington, Elmer, L, ,**

Mailing Address 3301 Knollwood Ln

City  
Homewood

State  
IL

Zip Code  
60430-2709

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Clinical Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-196**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Washington, Elmer, L, ,**

Mailing Address 3301 Knollwood Ln

City  
Homewood

State  
IL

Zip Code  
60430-2709

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Clinical Solutions MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-192**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weidenkopf, Thomas, W, ,**

Mailing Address 252 7th Ave  
Apt 5A

City  
New York

State  
NY

Zip Code  
10001-7331

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
EVP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4581.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-716**

Amount of Each Receipt this Period

416.52

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1016.52

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Weidenkopf, Thomas, W, ,**

Mailing Address 252 7th Ave  
Apt 5A

City  
New York

State  
NY

Zip Code  
10001-7331

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
EVP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4581.72

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-708**

Amount of Each Receipt this Period

416.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Weigel, Lynette, M, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Bus Proj Prog Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-177**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weigel, Lynette, M, ,**

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 (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Bus Proj Prog Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-174**

Amount of Each Receipt this Period

41.67

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

499.86

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Weinzierl-Jueckstock, Vicki, M, ,**

Mailing Address 11997 Deer Creek Ct

City  
Plymouth

State  
MI

Zip Code  
48170-2823

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-662**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Weinzierl-Jueckstock, Vicki, M, ,**

Mailing Address 11997 Deer Creek Ct

City  
Plymouth

State  
MI

Zip Code  
48170-2823

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Bus Proj Program Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-655**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weiss, Richard, B, ,**

Mailing Address 14600 Sunset Ln

City  
Southwest Ranches

State  
FL

Zip Code  
33330-3414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-356**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

133.34



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Weiss, Richard, B, ,**

Mailing Address 14600 Sunset Ln

City  
Southwest Ranches

State  
FL

Zip Code  
33330-3414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Market President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-351**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Weitendorf, Karen, A, ,**

Mailing Address 740 Dalton Ln

City  
Bolingbrook

State  
IL

Zip Code  
60490-3214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Product Implement Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-368**

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weitendorf, Karen, A, ,**

Mailing Address 740 Dalton Ln

City  
Bolingbrook

State  
IL

Zip Code  
60490-3214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Product Implement Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.37

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-363**

Amount of Each Receipt this Period

41.67

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

133.34

**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:  
(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wells, John, H, ,**

Mailing Address 1223 Hull St

City  
Baltimore

State  
MD

Zip Code  
21230-5244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medicare Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-666**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wells, John, H, ,**

Mailing Address 1223 Hull St

City  
Baltimore

State  
MD

Zip Code  
21230-5244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Medicare Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-659**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wells, Sharon, M, ,**

Mailing Address 6 Brockway Rd

City  
Ellington

State  
CT

Zip Code  
06029-2100

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, IT Program Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-74**

Amount of Each Receipt this Period

20.83

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

520.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wells, Sharon, M., ,**

Mailing Address 6 Brockway Rd

City  
Ellington

State  
CT

Zip Code  
06029-2100

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, IT Program Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.13

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-74**

Amount of Each Receipt this Period

20.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wiater, David, , ,**

Mailing Address 295 St. James Dr

City  
Winston Salem

State  
NC

Zip Code  
27107-9893

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-680**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wiater, David, , ,**

Mailing Address 295 St. James Dr

City  
Winston Salem

State  
NC

Zip Code  
27107-9893

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-673**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wieczynski, Geoffrey, E, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Health Plan CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-453**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wieczynski, Geoffrey, E, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Health Plan CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-447**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wilkinson, Barbara, , ,**

Mailing Address 223 Wentworth

City  
Spring Branch

State  
TX

Zip Code  
78070-4911

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Private Exchnge Prod Spec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-701**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wilkinson, Barbara, , ,**

Mailing Address 223 Wentworth

City

Spring Branch

State

TX

Zip Code

78070-4911

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Private Exchange Prod Spec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 201811910297-694**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wilson, Christopher, , ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Bus Proj Prog Mgmt

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

**Transaction ID : 201811910297-100**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wilson, Sharon, G, ,**

Mailing Address 344 Knoll Rd

City

Plymouth Meeting

State

PA

Zip Code

19462-7103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Product Mgmt / Dev

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

**Transaction ID : 2018102211216-563**

Amount of Each Receipt this Period

100.00

☐ Memo Item**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 238 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Sharon, G, ,

Mailing Address 344 Knoll Rd

City  
Plymouth Meeting

State  
PA

Zip Code  
19462-7103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, Product Mgmt / Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-557

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wingle, Paul, , ,

Mailing Address 7 Exeter Park

City  
Farmington

State  
CT

Zip Code  
06032-1555

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Oprtnl Integrity&Prod

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : 2018102211216-328

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wingle, Paul, , ,

Mailing Address 7 Exeter Park

City  
Farmington

State  
CT

Zip Code  
06032-1555

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
VP, Oprtnl Integrity&Prod

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

Transaction ID : 2018111910297-324

Amount of Each Receipt this Period

250.00

☐ Memo Item

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 239 OF 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Aetna Inc. Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Winn, Joseph, , ,

Mailing Address 4401 Gregg Rd

City

Brookeville

State

MD

Zip Code

20833-1033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Govt Relations Spec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-235

Amount of Each Receipt this Period

100.00

☐ Memo Item

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Winn, Joseph, , ,

Mailing Address 4401 Gregg Rd

City

Brookeville

State

MD

Zip Code

20833-1033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Govt Relations Spec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2018

Transaction ID : 2018111910297-231

Amount of Each Receipt this Period

100.00

☐ Memo Item

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Winters, Michael, L, ,

Mailing Address 8651 Garbow Dr SE

City

Alto

State

MI

Zip Code

49302-9173

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Network Management

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : 2018102211216-532

Amount of Each Receipt this Period

50.00

☐ Memo Item

Memo Item

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  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Winters, Michael, L, ,**

Mailing Address 8651 Garbow Dr SE

City  
Alto

State  
MI

Zip Code  
49302-9173

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Network Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-526**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wisdom, Keith, I, ,**

Mailing Address 5507 W 147th Ter

City

Overland Park

State

KS

Zip Code

66223-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Hlth Plan II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-545**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wisdom, Keith, I, ,**

Mailing Address 5507 W 147th Ter

City

Overland Park

State

KS

Zip Code

66223-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicaid Hlth Plan II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-539**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Aetna Inc. Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wolf, James, P, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-690**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wolf, James, P, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

Exec Dir, Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-683**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wolfe, Michael, D, ,**

Mailing Address 1334 Kensington Blvd

City  
Fort Wayne

State  
IN

Zip Code  
46805-5320

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-502**

Amount of Each Receipt this Period

83.33

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

283.33

# **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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wolfe, Michael, D, ,**

Mailing Address 1334 Kensington Blvd

City

Fort Wayne

State

IN

Zip Code

46805-5320

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Dir, Service Operations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-496**

Amount of Each Receipt this Period

83.33



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wooldridge, Tyree, S, ,**

Mailing Address 413 Sandcastle Rd

City

Franklin

State

TN

Zip Code

37069-7222

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicare Supplement

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-303**

Amount of Each Receipt this Period

250.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wooldridge, Tyree, S, ,**

Mailing Address 413 Sandcastle Rd

City

Franklin

State

TN

Zip Code

37069-7222

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

VP, Medicare Supplement

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-299**

Amount of Each Receipt this Period

250.00



Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

583.33

**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

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(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wright, Kelly, , ,**

Mailing Address 23679 Lyon Ridge Dr

City  
South Lyon

State  
MI

Zip Code  
48178-8226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Cofinity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : 2018102211216-155**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wright, Kelly, , ,**

Mailing Address 23679 Lyon Ridge Dr

City  
South Lyon

State  
MI

Zip Code  
48178-8226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Sr Dir, Cofinity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-152**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Young, Jeffrey, A, ,**

Mailing Address 100 Country Brook Dr

City  
Venetia

State  
PA

Zip Code  
15367-1050

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aetna Inc.

Occupation (for Individual)  
Dir, DVV Acct Directors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : 2018111910297-101**

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Zaugg, Eleanor, R, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP Enterprise Infr Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2933.37

Date of Receipt

10 / 19 / 2018

**Transaction ID : 2018102211216-245**

Amount of Each Receipt this Period

266.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Zaugg, Eleanor, R, ,**

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 (for Individual)

Aetna Inc.

Occupation (for Individual)

VP Enterprise Infr Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2933.37

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-241**

Amount of Each Receipt this Period

266.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Zhang, Bing, , ,**

Mailing Address 142 Preakness Dr

City

Oswego

State

IL

Zip Code

60543-4082

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

App Softwr Delivery Advsr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 16 / 2018

**Transaction ID : 2018111910297-399**

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

553.34

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 245 OF 258

<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Zuravnsky, Amanda, C, ,**

Mailing Address 58 Wyckoff Dr

City  
PittstownState  
NJZip Code  
08867-4238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, NAT Regional Sls

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		19		2018

**Transaction ID : 2018102211216-159**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Zuravnsky, Amanda, C, ,**

Mailing Address 58 Wyckoff Dr

City  
PittstownState  
NJZip Code  
08867-4238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Aetna Inc.

Occupation (for Individual)

Sr Dir, NAT Regional Sls

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		16		2018

**Transaction ID : 2018111910297-156**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

50.00

**TOTAL** This Period (last page this line number only)..... ►

86335.38

**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 246 OF 258

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. Angie Craig For Congress**

Mailing Address P.O. Box 22116

City  
EaganState  
MNZip Code  
55122Purpose of Disbursement  
Contribution (2018 General Debt)

011

Candidate Name

**Craig, Angela, Dawn, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	4			2	0	1	8		

FEC Identification Number

**C** C00575209**Transaction ID : 52167206500**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANNIEPAC**

Mailing Address 1 Park Row 5Th Fl

City  
ProvidenceState  
RIZip Code  
02903Purpose of Disbursement  
Contribution

011

Candidate Name

**ANNIEPAC**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☐ General  
☒ Other (specify)

State:

District:

Contribution

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	4			2	0	1	8		

FEC Identification Number

**C** C00540062**Transaction ID : A5C99ED10B**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Armstrong For Congress**Mailing Address 1515 Burnt Boat Drive  
Box 112City  
BismarckState  
NDZip Code  
58503Purpose of Disbursement  
Contribution

011

Candidate Name

**Armstrong, Kelly, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: ND

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	1	8		

FEC Identification Number

**C** C00670547**Transaction ID : 9DE3CD8A8**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10000.00

**TOTAL** This Period (last page this line number only)..... ►

**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 247 OF 258

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. At The Table!**Mailing Address 910 17Th St NW  
Ste 925City  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**At The Table!**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	1	8		

FEC Identification Number

C C00552489

**Transaction ID : 88EBE9BAFA**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ben Cardin For Senate, Inc.**

Mailing Address P.O. Box 21093

City  
CatonsvilleState  
MDZip Code  
21228Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Cardin, Benjamin, L., ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

C C00411587

**Transaction ID : D38D78F9548**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bill Flores For Congress**

Mailing Address PO Box 6207

City  
BryanState  
TXZip Code  
77805Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Flores, William, H., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX

District: 17

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

FEC Identification Number

C C00472241

**Transaction ID : A541AA2388**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

12500.00

**TOTAL** This Period (last page this line number only)..... ►

**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 248 OF 258

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. Brady For Congress**

Mailing Address PO Box 8277

City  
The WoodlandsState  
TXZip Code  
77387-8277Purpose of Disbursement  
Contribution

011

Candidate Name

**Brady, Kevin, Patrick, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

**C** C00311043**Transaction ID : 56A83BAF72**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cindy Hyde-Smith For US Senate**

Mailing Address PO Box 2930

City  
JacksonState  
MSZip Code  
39207Purpose of Disbursement  
Contribution (2018 GENERAL RUN-OFF)

011

Candidate Name

**Hyde-Smith, Cindy, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☐ General  
☒ Other (specify) Runoff

State: MS

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	9			2	0	1	8		

FEC Identification Number

**C** C00675348**Transaction ID : FC9735CD71**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cory Gardner For Senate**

Mailing Address 9227 E Lincoln Ave #200-234

City  
Lone TreeState  
COZip Code  
80124-5506Purpose of Disbursement  
Contribution

011

Candidate Name

**Gardner, Cory, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	8		

FEC Identification Number

**C** C00492454**Transaction ID : DF3CB5C027**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

12500.00

**TOTAL** This Period (last page this line number only)..... ►



**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 249 OF 258

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. Doing Right - Results Action Unity Leadership PAC Dr Raul PAC**

Mailing Address PO Box 3433

City  
Palm DesertState  
CAZip Code  
92261Purpose of Disbursement  
Contribution

011

Candidate Name

Doing Right - Results Action Unity Leadership PAC Dr Raul PAC

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	4			2	0	1	8		

FEC Identification Number

C C00569871

Transaction ID : 69E8734407E

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Donna Shalala For Congress**

Mailing Address PO Box 330602

City  
MiamiState  
FLZip Code  
33233Purpose of Disbursement  
Contribution

011

Candidate Name

Shalala, Donna, E., ,

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify)

State: FL

District: 27

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	4			2	0	1	8		

FEC Identification Number

C C00672311

Transaction ID : 55AA0C2057!

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Elect Democratic Women**

Mailing Address 918 Pennsylvania Ave SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Contribution

011

Candidate Name

Elect Democratic Women

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

C C00685297

Transaction ID : 4BB9939893!

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

12500.00

TOTAL This Period (last page this line number only)..... ►

**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 250 OF 258

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. Friends Of John Barrasso**

Mailing Address PO Box 52008

City  
CasperState  
WYZip Code  
82605Purpose of Disbursement  
Contribution

011

Candidate Name

**Barrasso, John, Anthony, ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WY

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

**C** C00436386**Transaction ID : 9B59EA040F:**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends Of Mark Warner**Mailing Address 201 North Union Street  
Suite 300City  
AlexandriaState  
VAZip Code  
22314Purpose of Disbursement  
Contribution

011

Candidate Name

**Warner, Mark, Robert, ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

**C** C00438713**Transaction ID : 2F85CE41434**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends Of Sherrod Brown**

Mailing Address PO Box 15293

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Contribution

011

Candidate Name

**Brown, Sherrod, Campbell, ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

**C** C00264697**Transaction ID : AB7B605EB:**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10000.00

**TOTAL** This Period (last page this line number only)..... ►

**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 251 OF 258

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. Friends Of Todd Young, Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	4		2	0	1	8		

Mailing Address PO Box 1053

City  
BloomingtonState  
INZip Code  
47402Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Young, Todd, Christopher, ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2022

☒ Primary☐ General☐ Other (specify) ▼

State: IN

District:

FEC Identification Number

**C** C00459255**Transaction ID : 70711C8296A**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Georgians For Isakson**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	5		2	0	1	8		

Mailing Address Post Office Box 250116

City  
AtlantaState  
GAZip Code  
30325Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Isakson, Johnny, H., ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2022

☒ Primary☐ General☐ Other (specify) ▼

State: GA

District:

FEC Identification Number

**C** C00384693**Transaction ID : EDBEBDFA0I**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Grassley Committee Inc**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	5		2	0	1	8		

Mailing Address PO Box 1000

City  
Des MoinesState  
IAZip Code  
50304-1000Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Grassley, Charles, E., ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2022

☒ Primary☐ General☐ Other (specify) ▼

State: IA

District:

FEC Identification Number

**C** C00230482**Transaction ID : 42F927D25A**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6000.00

**TOTAL** This Period (last page this line number only)..... ►

**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 252 OF 258

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. Gregg Harper For Congress**

Mailing Address Post Office Box 54344

City  
PearlState  
MSZip Code  
39288Purpose of Disbursement  
Contribution

011

Candidate Name

**Harper, Gregg, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MS

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0							2	5				2018

FEC Identification Number

**C** C00441295**Transaction ID : D7AA2AEE05**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Handel For Congress, Inc.**

Mailing Address 4010 Old Milton Pkwy

City  
AlpharettaState  
GAZip Code  
30005Purpose of Disbursement  
Contribution

011

Candidate Name

**Handel, Karen, C., ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0							2	5				2018

FEC Identification Number

**C** C00633362**Transaction ID : D122E5C7F5f**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hudson For Congress**

Mailing Address PO Box 5053

City  
ConcordState  
NCZip Code  
28027Purpose of Disbursement  
Contribution

011

Candidate Name

**Hudson, Richard, Lane, , Jr.**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0							2	5				2018

FEC Identification Number

**C** C00504522**Transaction ID : 3AD5400425**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7500.00

**TOTAL** This Period (last page this line number only).....▶

**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 253 OF 258

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. Jason Smith For Congress**

Mailing Address PO Box 1324

City  
Cape GirardeauState  
MOZip Code  
63702-1324Purpose of Disbursement  
Contribution

011

Candidate Name

**Smith, Jason, Thomas, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MO District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

**C** C00541862**Transaction ID : 4E5C43304A'**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kirkpatrick For Congress**

Mailing Address PO Box 3015

City  
TucsonState  
AZZip Code  
85702Purpose of Disbursement  
Contribution

011

Candidate Name

**Kirkpatrick, Ann, L., ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	8		

FEC Identification Number

**C** C00651042**Transaction ID : 358CBAFF58I**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kuster For Congress, Inc**

Mailing Address PO Box 1498

City  
ConcordState  
NHZip Code  
03302Purpose of Disbursement  
Contribution

011

Candidate Name

**Kuster, Ann, McLane, ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NH District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	4			2	0	1	8		

FEC Identification Number

**C** C00462861**Transaction ID : EB436B2CBI**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6500.00

**TOTAL** This Period (last page this line number only).....▶

**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 254 OF 258

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. LaHood for Congress**

Mailing Address P.O. Box 10735

City  
PeoriaState  
ILZip Code  
61612

Purpose of Disbursement

Voided Contribution. Contribution Check Originally Dated 06/29/2018.

011

Candidate Name

**LaHood, Darin, M., ,**

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: IL

District: 18

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	6			2	0	1	8		

FEC Identification Number

**C** C00575050**Transaction ID : DE6C3D4501**

Amount of Each Disbursement this Period

- 1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Making A Responsible Stand For Households In America PAC**

Mailing Address PO Box 3241

City  
BrentwoodState  
TNZip Code  
37024

Purpose of Disbursement

Contribution

011

Candidate Name

**Making A Responsible Stand For Households In America PAC**

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2018

☐ Primary☐ General☒ Other (specify)

State:

District:

Contribution

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	4			2	0	1	8		

FEC Identification Number

**C** C00409276**Transaction ID : 97CFFB860DI**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Mike Braun For Indiana**

Mailing Address PO Box 159

City  
ZionsvilleState  
INZip Code  
46077

Purpose of Disbursement

Contribution (2018 GENERAL DEBT RETIREMENT)

011

Candidate Name

**Braun, Michael, K., ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: IN

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	8		

FEC Identification Number

**C** C00653147**Transaction ID : E7377684732**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4000.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. New Democrat Coalition PAC**Mailing Address 700 13Th Street, NW  
Suite 600City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Voided Contribution. Contribution Check Originally Dated 01/23/2018.

011

Candidate Name

**New Democrat Coalition PAC**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	6			2	0	1	8		

FEC Identification Number

C C00409730

**Transaction ID : 03D9D2E36D**

Amount of Each Disbursement this Period

- 5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Olson For Congress Committee**

Mailing Address PO Box 16381

City  
Sugar LandState  
TXZip Code  
77496-6381Purpose of Disbursement  
Contribution

011

Candidate Name

**Olson, Peter, Graham, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify)

State: TX

District: 22

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

C C00437913

**Transaction ID : 8831AAE3B4**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Peters For Michigan**

Mailing Address PO Box 32072

City  
DetroitState  
MIZip Code  
48244Purpose of Disbursement  
Contribution

011

Candidate Name

**Peters, Gary, Charles, ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

C C00437889

**Transaction ID : 5F514C060C**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

- 1000.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. Peters For Michigan**

Mailing Address PO Box 32072

City  
DetroitState  
MIZip Code  
48244Purpose of Disbursement  
Contribution

011

Candidate Name

**Peters, Gary, Charles, ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

**C** C00437889**Transaction ID : 29FACCC05E**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Thom Tillis Committee**

Mailing Address PO Box 97396

City  
RaleighState  
NCZip Code  
27624Purpose of Disbursement  
Contribution

011

Candidate Name

**Tillis, Thomas, Roland, ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	4			2	0	1	8		

FEC Identification Number

**C** C00545772**Transaction ID : 6057E297719**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tom Rice For Congress**

Mailing Address PO Box 70098

City  
Myrtle BeachState  
SCZip Code  
29572-0020Purpose of Disbursement  
Contribution

011

Candidate Name

**Rice, Tom, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

FEC Identification Number

**C** C00506048**Transaction ID : 074328D3697**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7500.00

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. Walden For Congress**

Mailing Address PO Box 1091

City  
Hood RiverState  
ORZip Code  
97031-0037Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Walden, Gregory, Paul, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	1	8		

FEC Identification Number

**C** C00333427**Transaction ID : D0C57801A3**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Walorski For Congress Inc**

Mailing Address PO Box 954

City  
MishawakaState  
INZip Code  
46546-0954Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Walorski, Jacqueline, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	4			2	0	1	8		

FEC Identification Number

**C** C00468579**Transaction ID : 6C6720E4ED**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4500.00

**TOTAL** This Period (last page this line number only).....▶

92500.00

**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 258 OF 258

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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**

Full Name (Last, First, Middle Initial)

**A. Friends of Larry Householder**

Mailing Address PO Box 61

City  
GlenfordState  
OHZip Code  
43739Purpose of Disbursement  
VOIDED Non-Federal Contribution (Contribution Check Originally Dated  
09/15/2018)  
Candidate Name

011

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2018

FEC Identification Number

C

Transaction ID : 623172977E2

Amount of Each Disbursement this Period

- 1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Scott Lipps**

Mailing Address 418 Park Avenue

City  
FranklinState  
OHZip Code  
45005Purpose of Disbursement  
VOIDED Non-Federal Contribution (Contribution Check Originally Dated  
09/15/2018)  
Candidate Name

011

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2018

FEC Identification Number

C

Transaction ID : 46C405A9864

Amount of Each Disbursement this Period

- 750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. US TREASURY**

Mailing Address 3700 EAST-WEST HIGHWAY

City  
HYATTSVILLEState  
MDZip Code  
20782Purpose of Disbursement  
Disgorgement of Excessive Political Contribution (Footnote Attached)

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2018

FEC Identification Number

C

Transaction ID : V30BE34A23

Amount of Each Disbursement this Period

0.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 1749.96

- 1749.96