

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

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

FOR LINE NUMBER: PAGE 1494 OF 3209

(check only one)

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

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

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

A. Kucharczyk, James, , ,

Mailing Address 900 Cottage Grove Rd

City
Bloomfield

State
CT

Zip Code
06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cigna Corp.

Occupation (for Individual)

Third Party Management Managing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2215.00

Date of Receipt

12 / 12 / 2019

Transaction ID : 2019121074911-15553

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

B. Kucharczyk, James, , ,

Mailing Address 900 Cottage Grove Rd

City
Bloomfield

State
CT

Zip Code
06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cigna Corp.

Occupation (for Individual)

Third Party Management Managing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2215.00

Date of Receipt

12 / 26 / 2019

Transaction ID : 2019122562910-15584

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

c. Kulig, Christopher, A, ,

Mailing Address 97 Main St

City
Blandford

State
MA

Zip Code
01008-9518

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CT GENERAL LIFE INSURANCE CO

Occupation (for Individual)

Program Management Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

07 / 11 / 2019

Transaction ID : 2019070971710-6369

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

265.00