

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Aetna Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		364336.87
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	406720.98									
(c) Total Receipts (from Line 19)	38330.23	126464.34								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	445051.21	490801.21								
7. Total Disbursements (from Line 31)	67625.00	113375.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	377426.21	377426.21								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Aetna Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	27916.70	63359.35
(ii) Unitemized	10413.53	53104.99
(iii) TOTAL (add Lines 11(a)(i) and (ii)	38330.23	116464.34
(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)	38330.23	116464.34
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	10000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	38330.23	126464.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	38330.23	126464.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	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.....	29000.00	74750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	125.00	125.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	125.00	125.00
29. Other Disbursements.....	38500.00	38500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	67625.00	113375.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	67625.00	113375.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	38330.23	116464.34
34. Total Contribution Refunds (from Line 28(d))	125.00	125.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38205.23	116339.34
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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 80
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial) Dana S. Abetti		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	1	0													
Mailing Address 4 Round Hill Road		Transaction ID: 031610-353																				
City Salem	State CT	Zip Code 06420-3850																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00																			
250.00																						
Name of Employer Aetna Inc.	Occupation Strategic Planner																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>750.00</td></tr> </table>	750.00																				
750.00																						

B.

Full Name (Last, First, Middle Initial) William T. Aleman		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	1	0													
Mailing Address 105 Emily Way		Transaction ID: 031610-213																				
City West Hartford	State CT	Zip Code 06107-3154																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>100.00</td></tr> </table>	100.00																			
100.00																						
Name of Employer Aetna Inc.	Occupation Underwriting Head																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>300.00</td></tr> </table>	300.00																				
300.00																						

C.

Full Name (Last, First, Middle Initial) Beth E. Andersen		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	1	0													
Mailing Address 3330 Vaughn Road		Transaction ID: 031610-253																				
City Lafayette	State CA	Zip Code 94549-1950																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>200.00</td></tr> </table>	200.00																			
200.00																						
Name of Employer Aetna Inc.	Occupation Region Head West																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>600.00</td></tr> </table>	600.00																				
600.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td>550.00</td></tr></table>	550.00
550.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mary V. Anderson

Mailing Address 386 Richardson Way

City State Zip Code
Mill Valley CA 94941-4053

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Aetna Inc. Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-414

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Raymond J. Arroyo

Mailing Address 14 Michelle Lane

City State Zip Code
Avon CT 06001-3267

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Aetna Inc. Head of Diversity

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-68

Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Peter S. Atwood

Mailing Address 22 Cowles Road

City State Zip Code
Bethlehem CT 06751-2215

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Aetna Inc. Head of AIMG Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-318

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) 350.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sherry R. Baker	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 18802 Wimbledon Circle	Transaction ID: 031610-364
	City State Zip Code Lutz FL 33558-5300	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Aetna Inc.	Occupation Regional Head of Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Duane H. Barnes	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 14 Summer Hill Drive	Transaction ID: 031610-151
	City State Zip Code Sinking Spring PA 19608-9671	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Aetna Inc.	Occupation Head of Pharmacy Fulfilmnt Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) Craig L. Bass	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 5175 Stillwater Trail	Transaction ID: 031610-205
	City State Zip Code Frisco TX 75034-1215	Amount of Each Receipt this Period 165.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Aetna Inc.	Occupation Medicaid Region Head-West/SW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00	

SUBTOTAL of Receipts This Page (optional)	415.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Katharine Noel Begley

Mailing Address 2042 General Alexander Drive

City Malvern State PA Zip Code 19355-9799

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Head of Student Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 19 / 2010
Transaction ID: 031610-444
 Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
Dana M. Benbow

Mailing Address 32 Karen Place

City Budd Lake State NJ Zip Code 07828-1021

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Hd AGB UW, Product & Sls Supt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 03 / 19 / 2010
Transaction ID: 031610-525
 Amount of Each Receipt this Period: 150.00

C.

Full Name (Last, First, Middle Initial)
Patricia Bennett

Mailing Address 42 Reussner Road

City Southington State CT Zip Code 06489-3310

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Senior Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt: 03 / 19 / 2010
Transaction ID: 031610-54
 Amount of Each Receipt this Period: 87.50

SUBTOTAL of Receipts This Page (optional) ► **337.50**

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 11 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
William Berenson

Mailing Address 2427 West Huron Street

City State Zip Code
Chicago IL 60612-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Local Market Head MA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-411

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
John J. Bermel

Mailing Address 237 Old Farms Road

City State Zip Code
Simsbury CT 06070-1533

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. CFO, Business Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.98

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-437

Amount of Each Receipt this Period
416.66

C. Full Name (Last, First, Middle Initial)
Mark Bertolini

Mailing Address 14 West Hill Drive

City State Zip Code
West Hartford CT 06119-1347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.98

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-510

Amount of Each Receipt this Period
416.66

SUBTOTAL of Receipts This Page (optional) ► **933.32**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Sandra Brickey

Mailing Address 2612 White Rose Drive

City Loganville State GA Zip Code 30052-2196

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Bus Project Program Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.99

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-245
 Amount of Each Receipt this Period 88.33

B.

Full Name (Last, First, Middle Initial)
Laurie Brubaker

Mailing Address 1418 Danbury Drive

City Mansfield State TX Zip Code 76063-3845

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Hd, Integ Hlth/Productiv Solut

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1012.50

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-446
 Amount of Each Receipt this Period 337.50

C.

Full Name (Last, First, Middle Initial)
Sheryl A. Burke

Mailing Address 53 Chatham Hill

City South Glastonbury State CT Zip Code 06073-3543

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Head, National Care Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-271
 Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► **625.83**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) David H. Burton		Date of Receipt MM / DD / YYYY 03 / 19 / 2010		
	Mailing Address 13 Lorraine Place		Transaction ID: 031610-560		
	City Summit	State NJ	Zip Code 07901-1908	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Aetna Inc.	Occupation Strategic Client Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

B.	Full Name (Last, First, Middle Initial) Elena E. Butkus		Date of Receipt MM / DD / YYYY 03 / 19 / 2010		
	Mailing Address 341 South Spring Avenue		Transaction ID: 031610-16		
	City Lagrange	State IL	Zip Code 60525-6207	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Aetna Inc.	Occupation Sr State Gov Rel Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

C.	Full Name (Last, First, Middle Initial) Mary E. Cardin		Date of Receipt MM / DD / YYYY 03 / 19 / 2010		
	Mailing Address 56 Balsam Landing Road		Transaction ID: 031610-357		
	City Glastonbury	State CT	Zip Code 06033	Amount of Each Receipt this Period 83.33	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Aetna Inc.	Occupation Head, M & A Integration			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.99			

SUBTOTAL of Receipts This Page (optional)	▶	333.33
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 14 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
David Carter

Mailing Address 35 Riverside Road

City State Zip Code
Simsbury CT 06070-2514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of Corp Communications

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-580

Amount of Each Receipt this Period
175.00

B. Full Name (Last, First, Middle Initial)
William J. Casazza

Mailing Address 229 Cold Spring Road

City State Zip Code
Avon CT 06001-4014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.98

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-389

Amount of Each Receipt this Period
416.66

C. Full Name (Last, First, Middle Initial)
Judith Chamberlain

Mailing Address 10 Sea Grass Farm Road

City State Zip Code
Brunswick ME 04011-7841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-212

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **666.66**

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 15 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
W. F. Cobbin

Mailing Address 4430 Glen Kernan Parkway, East

City State Zip Code
Jacksonville FL 32224-5626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1218.75

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-552

Amount of Each Receipt this Period
406.25

B.

Full Name (Last, First, Middle Initial)
Jerome Coller

Mailing Address 3503 Northridge Drive

City State Zip Code
Baltimore MD 21208-3032

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 892.50

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-184

Amount of Each Receipt this Period
297.50

C.

Full Name (Last, First, Middle Initial)
Linda S. Cooper

Mailing Address 16566 N 109th Place

City State Zip Code
Scottsdale AZ 85255-9093

FEC ID number of contributing federal political committee. **C**

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-522

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **803.75**

TOTAL This Period (last page this line number 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 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Eric D. Cormier

Mailing Address 57 Sugar Maple Drive

City State Zip Code
Newtown Square PA 19073-2020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. General Manager Retiree Mkts

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	1	0

Transaction ID: 031610-348

Amount of Each Receipt this Period
166.67

B. Full Name (Last, First, Middle Initial)
James Cowan

Mailing Address 54 E Wall Street

City State Zip Code
Bethlehem PA 18018-6009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Reg. Medical Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	1	0

Transaction ID: 031610-577

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Rodger A. Coyne

Mailing Address 5 Highview Road

City State Zip Code
Simsbury CT 06070-2115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Portfolio Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	1	0

Transaction ID: 031610-30

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **491.67**

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 17 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M. James Crowley

Mailing Address 16 Grass Bonnet Lane

City State Zip Code
Wethersfield CT 06109-2727

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of Cash Comp & Incentives

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-308

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
Gary A. Culp

Mailing Address 7911 East Santa Cruz Avenue

City State Zip Code
Orange CA 92869-5649

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Region Head Medicare W

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-97

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Russell R. Dickhart

Mailing Address 509 Maplewood Avenue

City State Zip Code
Wayne PA 19087-4718

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Hd Sales&Operations Govt Sect

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-217

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Bradley M. Dirks

Mailing Address 82 N Acacia Drive

City State Zip Code
Gilbert AZ 85233-5126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Senior Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-186

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Roberta L. Downey

Mailing Address 28 Freedom Way

City State Zip Code
Glastonbury CT 06033-2841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Hd Strategic Sys & Processes

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-215

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
Edward S. Doyle

Mailing Address 17 Stonehenge Road

City State Zip Code
Morristown NJ 07960-2649

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Hd Strat Initiatives / Bus Dev

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 249.99

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-537

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)

383.33

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 19 / 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Cheryl R. Edwardsen	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 6241 Toscana Circle	Transaction ID: 031610-28
	City State Zip Code Fort Worth TX 76140-8239	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Aetna Inc.	Occupation Head of Product Dev, SGB	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Jeff Emerson	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 86 Country Mile Road PO Box 313	Transaction ID: 031610-504
	City State Zip Code Georgetown ME 04548-3112	Amount of Each Receipt this Period 208.33
	FEC ID number of contributing federal political committee. C	
Name of Employer Aetna Inc.	Occupation Head of Health Care Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624.99	

C.	Full Name (Last, First, Middle Initial) Patricia A. Farrell	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 1149 Kettle Pond Lane	Transaction ID: 031610-349
	City State Zip Code Great Falls VA 22066-1608	Amount of Each Receipt this Period 416.66
	FEC ID number of contributing federal political committee. C	
Name of Employer Aetna Inc.	Occupation Hd, Natl & Int'l Bus Solutions	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1249.98	

SUBTOTAL of Receipts This Page (optional)	724.99
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 20 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael W. Fedyna

Mailing Address 1836 Howe Lane

City State Zip Code
Maple Glen PA 19002-2915

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1218.75

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-173

Amount of Each Receipt this Period
406.25

B. Full Name (Last, First, Middle Initial)
Brian K. Fischer

Mailing Address 24059 N 113th Way

City State Zip Code
Scottsdale AZ 85255-5642

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Segment Hd of Finance-Medicaid

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-191

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Dean E. Fiscus

Mailing Address 4 Squire Hill

City State Zip Code
Old Lyme CT 06371-1356

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head Middle Markets

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-339

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **631.25**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 80
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Daniel R. Fishbein		Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 6 Hunts Point Road		Transaction ID: 031610-503
	City Cape Elizabeth	State ME	Zip Code 04107-2903
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
	Name of Employer Aetna Inc.	Occupation Head of New Product Businesses	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 624.99	

B.	Full Name (Last, First, Middle Initial) Michael A. Flammini		Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 3 Kilbourn Farms Lane		Transaction ID: 031610-99
	City Simsbury	State CT	Zip Code 06070-1271
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Aetna Inc.	Occupation Head of Strategic Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Brian T. Forbes		Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 5802 E 104 Street		Transaction ID: 031610-236
	City Tulsa	State OK	Zip Code 74137-7054
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Aetna Inc.	Occupation Market Head of Sales & Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	408.33
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Peter A. Francel

Mailing Address 6 Carriage Path

City State Zip Code
Chadds Ford PA 19317-9194

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head, BH & EAP Sales & Strateg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-274

Amount of Each Receipt this Period
115.00

B.

Full Name (Last, First, Middle Initial)
Kris Frank

Mailing Address 4771 Marlborough Way

City State Zip Code
Carmichael CA 95608-6244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of State Gov't Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.01

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-56

Amount of Each Receipt this Period
166.67

C.

Full Name (Last, First, Middle Initial)
Robert J. Franzoi

Mailing Address 420 Bowen Drive

City State Zip Code
Exton PA 19341-2358

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Region Head Net & Med Econ NE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-443

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **381.67**

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 23 / 80
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Christine M. Gagnon

Mailing Address 62 Chapman Drive

City State Zip Code
Glastonbury CT 06033-2728

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Investor Relations Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 347.04

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-317

Amount of Each Receipt this Period
115.68

B. Full Name (Last, First, Middle Initial)
Mark Garber

Mailing Address 35 Sheffield Lane

City State Zip Code
Avon CT 06001-3188

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of Alternative Investment

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-319

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mohit M. Ghose

Mailing Address 11 Creekside Lane

City State Zip Code
West Hartford CT 06107-3161

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of Public Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 549.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-3

Amount of Each Receipt this Period
183.00

SUBTOTAL of Receipts This Page (optional) ► **398.68**

TOTAL This Period (last page this line number 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 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jerald B. Gooden

Mailing Address 15 Wyndham Lane

City Farmington State CT Zip Code 06032-2758

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Region Head Northeast

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-258
Amount of Each Receipt this Period 175.00

B.

Full Name (Last, First, Middle Initial)
Floyd W. Green

Mailing Address 221 Trumbull Street #3005

City Hartford State CT Zip Code 06103-1528

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Head of Community Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-84
Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
Allan I. Greenberg

Mailing Address 1505 Old Barn Lane

City Highland Park State IL Zip Code 60035-3686

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Region Head Net & Med Econ MA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-591
Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional) ► 350.00

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

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

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

FOR LINE NUMBER: PAGE 25 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dale Grenolds

Mailing Address 9 Windward Drive

City State Zip Code
Newburyport MA 01950-3362

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Product Head

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-81

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Thomas J. Grote

Mailing Address 10109 Bracken Drive

City State Zip Code
Ellicott City MD 21042-1674

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Local Market Head SE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-322

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Garth R. Groves

Mailing Address 160 Beebe Farms Road

City State Zip Code
Coventry CT 06238-2450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Segment Head Actuary - LE&C

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-356

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 80
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial) Phillip J. Haas		Date of Receipt MM / DD / YYYY 03 / 19 / 2010
Mailing Address 4515 145th Place Southeast		Transaction ID: 031610-366
City Bellevue	State WA	Zip Code 98006-2479
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Aetna Inc.	Occupation Network Market Head	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.

Full Name (Last, First, Middle Initial) Pennell Witham Hamilton		Date of Receipt MM / DD / YYYY 03 / 19 / 2010
Mailing Address 28 Park Lane		Transaction ID: 031610-262
City Woodbridge	State CT	Zip Code 06525-2027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Aetna Inc.	Occupation CFO, LE & C	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.

Full Name (Last, First, Middle Initial) Brian D. Hammer		Date of Receipt MM / DD / YYYY 03 / 19 / 2010
Mailing Address 13914 Mallard Drive		Transaction ID: 031610-355
City Rogers	State MN	Zip Code 55374-8772
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Aetna Inc.	Occupation Account Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 80
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Frederick R. Hatfield

Mailing Address 1392 West Indigo Drive

City State Zip Code
Chandler AZ 85248-4384

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Hd, Medicaid Ops & Integration

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 03 / 19 / 2010
Transaction ID: 031610-498

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Nadine G. Hauf

Mailing Address 1813 San Leanna

City State Zip Code
Allen TX 75013-4741

FEC ID number of contributing federal political committee. **C**

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 19 / 2010
Transaction ID: 031610-487

Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
Dewayne M. Hiebert

Mailing Address 322 Maple Shade Road

City State Zip Code
Middletown CT 06457-7105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Product Head

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 19 / 2010
Transaction ID: 031610-569

Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 80
(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
							17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ralph A. Holmes

Mailing Address 5100 Lorraine Drive

City Frisco State TX Zip Code 75034-6302

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Local Market Head MA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 19 / 2010
Transaction ID: 031610-470
 Amount of Each Receipt this Period: 75.00

B.

Full Name (Last, First, Middle Initial)
Walter H. Hoskins

Mailing Address 210 West Bowmore Drive

City Blythewood State SC Zip Code 29016-7125

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Actuary II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 347.49

Date of Receipt: 03 / 19 / 2010
Transaction ID: 031610-204
 Amount of Each Receipt this Period: 115.83

C.

Full Name (Last, First, Middle Initial)
Michael W. Hudson

Mailing Address 210 Northington Drive

City Avon State CT Zip Code 06001-2359

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Region Head, Health Care Deliv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 03 / 19 / 2010
Transaction ID: 031610-550
 Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ► **315.83**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Regina R. Hunter	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 413 Copperfield Street	Transaction ID: 031610-373
	City State Zip Code Southlake TX 76092-2223	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Aetna Inc.	Occupation Region Head of Sales MA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) Charlyn Adlis Iovino	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 1823 Solitaire Lane	Transaction ID: 031610-590
	City State Zip Code McLean VA 22101-4235	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Aetna Inc.	Occupation Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

C.	Full Name (Last, First, Middle Initial) Christopher L. Jagmin	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 8181 Douglas Avenue	Transaction ID: 031610-486
	City State Zip Code Dallas TX 75225-6561	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Aetna Inc.	Occupation Senior Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional)	650.00
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 30 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Joyce S. James

Mailing Address 1296 Beacon Circle

City State Zip Code
Wellington FL 33414-3152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-406

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Joseph E. Jenkinson

Mailing Address 84 Lamentation Drive

City State Zip Code
Berlin CT 06037-3730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Chief Risk Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-222

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Climentene Jones

Mailing Address 9439 S Wabash Avenue

City State Zip Code
Chicago IL 60619-7235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-400

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **275.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 80
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kim A. Keck	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 3 Buena Vista Road	Transaction ID: 031610-338
	City State Zip Code West Hartford CT 06107-2912	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Aetna Inc. Head of Inv Rel & Treasurers	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

B.	Full Name (Last, First, Middle Initial) Pam D. Kehaly	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 31646 Foxfield Drive	Transaction ID: 031610-157
	City State Zip Code Westlake Village CA 91361-4714	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Aetna Inc. Head Corporate Sector, NA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Thomas L. Kelly	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 1326 N Central Avenue #409	Transaction ID: 031610-199
	City State Zip Code Phoenix AZ 85004-1758	Amount of Each Receipt this Period 416.66
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Aetna Inc. Head of Medicaid	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1249.98	

SUBTOTAL of Receipts This Page (optional)	726.66
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 32 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven B. Kelmar
Mailing Address 5 Pembroke Hill
City Farmington State CT Zip Code 06032-1461
FEC ID number of contributing federal political committee. **C**
Name of Employer Aetna Inc. Occupation Hd, Fed & State Gov't Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1249.98
Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-4
Amount of Each Receipt this Period 416.66

B. Full Name (Last, First, Middle Initial)
Clarence Carleton King
Mailing Address 13562 Braemar Drive
City Dallas State TX Zip Code 75234-5130
FEC ID number of contributing federal political committee. **C**
Name of Employer Aetna Inc. Occupation Local Market Head MA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-544
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Coleen H. Kivlahan
Mailing Address 1343 Northgate Square
City Reston State VA Zip Code 20190-3707
FEC ID number of contributing federal political committee. **C**
Name of Employer Aetna Inc. Occupation Head of Medicaid Med Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-192
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 716.66
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 33 / 80
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Charles H. Klippel		Date of Receipt
	Mailing Address 120 Henley Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 19 / 2010
	City	State	Zip Code
	Avon	CT	06001-4072
	FEC ID number of contributing federal political committee. C		Transaction ID: 031610-244
Name of Employer Aetna Inc.		Occupation Deputy General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 416.66
		<input type="text"/> 1249.98	

B.	Full Name (Last, First, Middle Initial) James Kohan		Date of Receipt
	Mailing Address 162 High Valley Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 19 / 2010
	City	State	Zip Code
	Canton	CT	06019-4524
	FEC ID number of contributing federal political committee. C		Transaction ID: 031610-45
Name of Employer Aetna Inc.		Occupation Head Small Group / Individual	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 300.00	

C.	Full Name (Last, First, Middle Initial) Brian J. Kost		Date of Receipt
	Mailing Address 10 Barry Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 19 / 2010
	City	State	Zip Code
	Suffield	CT	06078-2249
	FEC ID number of contributing federal political committee. C		Transaction ID: 031610-439
Name of Employer Aetna Inc.		Occupation Business Unit Finance Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 616.66
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 34 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Randall Krakauer

Mailing Address 29 Lorrie Lane

City

West Windsor

State

NJ

Zip Code

08550-5112

FEC ID number of contributing federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Natl Med Dir, Medicare Med Mgm

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-35

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

William I. Kramer

Mailing Address 45 Oakwood Drive

City

Dresher

State

PA

Zip Code

19025-2007

FEC ID number of contributing federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Dpty Chief Legal Health Deliv

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-455

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Akshay Kumar

Mailing Address 1415 Tolland Stage Road

City

Tolland

State

CT

Zip Code

06084-3113

FEC ID number of contributing federal political committee.

C

Name of Employer
Aetna Inc.

Occupation

Head, Strategic Resource Mgmt

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-14

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)

775.00

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 35 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mark R. Laborde

Mailing Address 3604 Silvery Lane

City State Zip Code
Jacksonville FL 32217-4227

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Local Market Head SE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-324

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Jean Latorre

Mailing Address 18 Weathervane Hill

City State Zip Code
Durham CT 06422-1723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Chief Investment Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-375

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Andrew J. Lee

Mailing Address 139 Stonepost Road

City State Zip Code
Glastonbury CT 06033-4172

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. COS to Office of the President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-89

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► 425.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 80
(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

A. Full Name (Last, First, Middle Initial)
Jarvis Leigh
 Mailing Address 12238 Hickory Knoll Court
 City State Zip Code
 Matthews NC 28105-0804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Aetna Inc. Network Market Head
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 19 / 2010
Transaction ID: 031610-69
 Amount of Each Receipt this Period
 120.00

B. Full Name (Last, First, Middle Initial)
Donald Liss
 Mailing Address 313 Rices Mill Road
 City State Zip Code
 Wyncote PA 19095-1706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Aetna Inc. Reg. Medical Director
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 19 / 2010
Transaction ID: 031610-485
 Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Steven G. Logan
 Mailing Address 15 Gray Rock Lane
 City State Zip Code
 Chappaqua NY 10514-2511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Aetna Inc. Local Market Head NE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 19 / 2010
Transaction ID: 031610-289
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional) ► 370.00
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 37 / 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Loretta A. Lorenzen	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 1403 West Decorah Road	Transaction ID: 031610-167
	City State Zip Code West Bend WI 53095-3701	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Aetna Inc. Senior Network Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Kirk H. Lusk	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 171 Cold Spring Road	Transaction ID: 031610-11
	City State Zip Code Avon CT 06001-4057	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Aetna Inc. Segment Head of Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Sibongile Magubane	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 54 Goodwin Circle	Transaction ID: 031610-238
	City State Zip Code Hartford CT 06105-5206	Amount of Each Receipt this Period 153.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Aetna Inc. ADO Program Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 459.99	

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 38 / 80
(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
							17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Paul E. Marchetti

Mailing Address 240 Putting Green Road

City State Zip Code
Trumbull CT 06611-2505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Natl Network Contract Svc Head

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-103

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Brian P. Marsella

Mailing Address 1801 West Addison, Unit 4W

City State Zip Code
Chicago IL 60613-4284

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Market Head

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-76

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Gregory S. Martino

Mailing Address 162 Timber Ridge Road

City State Zip Code
Hummelstown PA 17036-7444

FEC ID number of contributing federal political committee. **C**

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-576

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **475.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 80
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Raymond A. Maskell

Mailing Address 14 Clark Road

City State Zip Code
Lyme CT 06371-3007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Senior Business Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-163

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Thomas McAteer

Mailing Address 54 Cedar Point Drive

City State Zip Code
West Islip NY 11795-5014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Medicaid Region Head - East

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-209

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Meg A. McCabe

Mailing Address 191 Walden Street

City State Zip Code
West Hartford CT 06107-1744

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Hd, Mktg & Engagement Strategy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 916.89

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-55

Amount of Each Receipt this Period
305.63

SUBTOTAL of Receipts This Page (optional) ▶ **630.63**

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

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

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

FOR LINE NUMBER: PAGE 40 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Margaret McCarthy
Mailing Address PO Box 641
City Chatham State MA Zip Code 02633-0641
FEC ID number of contributing federal political committee. **C**
Name of Employer Aetna Inc. Occupation CIO & SVP, Procurement & RE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1249.98
Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-42
Amount of Each Receipt this Period 416.66

B. Full Name (Last, First, Middle Initial)
Frank G. McCauley
Mailing Address 25 Greystone Drive
City Canton State CT Zip Code 06019-3715
FEC ID number of contributing federal political committee. **C**
Name of Employer Aetna Inc. Occupation Hd, Consumer Business Segment
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-395
Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
Peter R. McClung
Mailing Address 552 Partridge Court
City Blue Bell State PA Zip Code 19422-1620
FEC ID number of contributing federal political committee. **C**
Name of Employer Aetna Inc. Occupation Strategic Client Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-571
Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional) ► 891.66
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 41 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert March Mead
Mailing Address 3891 Congress Street
City Fairfield State CT Zip Code 06824-2078
FEC ID number of contributing federal political committee. **C**
Name of Employer Aetna Inc. Occupation Hd, Strat Mktg & Communication
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1249.98
Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-161
Amount of Each Receipt this Period 416.66

B. Full Name (Last, First, Middle Initial)
Shannon P. Meroney
Mailing Address 6901 Glen Ridge Drive
City Austin State TX Zip Code 78731-2911
FEC ID number of contributing federal political committee. **C**
Name of Employer Aetna Inc. Occupation Sr State Gov Rel Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-159
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Gregory A. Miller
Mailing Address 1555 Ninth Street
City Manhattan Beach State CA Zip Code 90266-6126
FEC ID number of contributing federal political committee. **C**
Name of Employer Aetna Inc. Occupation Senior Medical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-113
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 616.66
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kay D. Mooney

Mailing Address 33 Fox Lane

City State Zip Code
Durham CT 06422-3221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Chf of Staff, Chrmn and CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-340

Amount of Each Receipt this Period
175.00

B.

Full Name (Last, First, Middle Initial)
Michael E. Morris

Mailing Address One Morgan Drive

City State Zip Code
Danvers MA 01923-1753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Network Market Head

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-462

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Louise Dufour Murphy

Mailing Address 43 Montauk Way

City State Zip Code
Glastonbury CT 06033-3394

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of Behavioral Health

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-78

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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

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

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

FOR LINE NUMBER: PAGE 43 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Thomas C. Nasby

Mailing Address 12857 Vickers Lake Court

City State Zip Code
Jacksonville FL 32224-8434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Network Market Head

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-105

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
John E. Neugebauer

Mailing Address 3150 Methaction Avenue

City State Zip Code
Worcester PA 19403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Dpty Chief Legal Offcr Litigat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-466

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Chiaw Eei Nggibson

Mailing Address 10 Deepwood Lane

City State Zip Code
West Hartford CT 06107-1008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Strat Planning, Mng Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-359

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **550.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Robert J. Nicholls

Mailing Address 745 Medinah Drive

City State Zip Code
Winston-Salem NC 27107-6027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Product Head

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-162

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Franklin C. Norman

Mailing Address 277 Cider Brook Road

City State Zip Code
Avon CT 06001-2849

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. CIO - AHM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1245.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-123

Amount of Each Receipt this Period
415.00

C.

Full Name (Last, First, Middle Initial)
Felicia F. Norwood

Mailing Address 15 West 15th Street

City State Zip Code
Chicago IL 60605-2723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Region Head Mid America

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.98

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-399

Amount of Each Receipt this Period
416.66

SUBTOTAL of Receipts This Page (optional) ► **1031.66**

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 45 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Peter R. Oades

Mailing Address 40 Hunters Ridge

City State Zip Code
Rocky Hill CT 06067-1743

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of Fixed Income

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-333

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Donna R. Otten

Mailing Address 105 Country Club Road

City State Zip Code
Bolton CT 06043-7460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of GoodHealth Integration

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-263

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Rajan Parmeswar

Mailing Address 7 Evans Drive

City State Zip Code
Simsbury CT 06070-3011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Controller & Chief Acct Offcr

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-8

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Susan M. Peters

Mailing Address 32 Gatewood Drive

City Avon State CT Zip Code 06001-3949

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Head of Reform Preparedness

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-276
 Amount of Each Receipt this Period 360.00

B.

Full Name (Last, First, Middle Initial)
Michael Joseph Phillips

Mailing Address 320 Sea Cliff Avenue

City San Francisco State CA Zip Code 94121-1030

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Hd Adjacencies & Chf Innov, NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-176
 Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
Andrew J. Picken

Mailing Address 216 Northwest Despain Street

City Portland State OR Zip Code 97801

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-114
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 560.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 80
(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

A. Full Name (Last, First, Middle Initial)
John C. Price
 Mailing Address 4285 Homestead Ridge Drive
 City State Zip Code
 Cumming GA 30041-5678
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2010
Transaction ID: 031610-346
 Amount of Each Receipt this Period
 150.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aetna Inc. Occupation Local Market Head SE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

B. Full Name (Last, First, Middle Initial)
David A. Queller
 Mailing Address 50 Asheworth Court Northwest
 City State Zip Code
 Atlanta GA 30327-1531
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2010
Transaction ID: 031610-558
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aetna Inc. Occupation National Accounts Regional Hd
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

C. Full Name (Last, First, Middle Initial)
Alfred P. Quirk, Jr.
 Mailing Address 29 Pembroke Hill
 City State Zip Code
 Farmington CT 06032-1461
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2010
Transaction ID: 031610-273
 Amount of Each Receipt this Period
 416.66
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aetna Inc. Occupation Hd of Finance and Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1249.98

SUBTOTAL of Receipts This Page (optional) ▶ **666.66**
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 48 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Wayne S. Rawlins

Mailing Address 7 Upper Heatherwood

City State Zip Code
Cromwell CT 06416-2709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Hd Business Planning & Rptg

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	1	0

Transaction ID: 031610-432

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
James Reid

Mailing Address 14 Beach Road

City State Zip Code
Monmouth Beach NJ 07750-1333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head Voluntary & DTC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	1	0

Transaction ID: 031610-453

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Lonny Reisman

Mailing Address 7 Black Rock Road

City State Zip Code
Muttontown NY 11545-3301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Chief Medical Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1249.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	1	0

Transaction ID: 031610-120

Amount of Each Receipt this Period
416.66

SUBTOTAL of Receipts This Page (optional) ► **616.66**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 80
(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

A.

Full Name (Last, First, Middle Initial)
Anne P. Rote

Mailing Address 5519 Purdue

City State Zip Code
Dallas TX 75209-4428

FEC ID number of contributing federal political committee. **C**

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-368

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Ross W. Sanders, Jr.

Mailing Address 7419 Colgate Avenue

City State Zip Code
Dallas TX 75225-4508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. National Accounts Regional Hd

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-566

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Borislava Sardak

Mailing Address 44 Summer Street

City State Zip Code
Sudbury MA 01776-2538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Senior Application Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-83

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **225.00**

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

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

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

FOR LINE NUMBER: PAGE 50 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mark Wesley Schmidt

Mailing Address 190 Berkeley Ridge Drive

City Columbia State SC Zip Code 29229-7579

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Local Market Head SE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-177
 Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
John Sheehy

Mailing Address 25 Williamsburg Lane

City Unionville State CT Zip Code 06085-1157

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Head Govt & Labor Sector, NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-27
 Amount of Each Receipt this Period 325.00

C. Full Name (Last, First, Middle Initial)
Virginia Shepherd

Mailing Address 6315 Cog Hill Drive

City Pasadena State TX Zip Code 77505-3835

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Senior Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2010
Transaction ID: 031610-582
 Amount of Each Receipt this Period 100.00

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 51 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Valerie Bonor Sideris

Mailing Address 155 Hitchcock Road

City State Zip Code
Southington CT 06489-2203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of Service Delivery

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-492

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
Steven Jay Sigal

Mailing Address 192 Krawski Drive

City State Zip Code
South Windsor CT 06074-3845

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head Of Internal Audit

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 555.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-415

Amount of Each Receipt this Period

185.00

C.

Full Name (Last, First, Middle Initial)
Elicia Spearman

Mailing Address 661 Ashley Court

City State Zip Code
Cheshire CT 06410-3246

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. HR Business Partner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-602

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional) ▶

410.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Claire M. Spettell

Mailing Address 1514 E Willow Grove Avenue

City State Zip Code
Wyndmoor PA 19038-7654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Informatics Head

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-435

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Janet Stallmeyer

Mailing Address 8 West 108th Court

City State Zip Code
Kansas City MO 64114-4991

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Medicaid Region Head - Central

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.98

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-207

Amount of Each Receipt this Period
416.66

C.

Full Name (Last, First, Middle Initial)
Robert J. Stillman

Mailing Address 35 Woodhaven Drive

City State Zip Code
Simsbury CT 06070-2642

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 768.75

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-379

Amount of Each Receipt this Period
256.25

SUBTOTAL of Receipts This Page (optional) ► **772.91**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 80
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
David A. Taaffe

Mailing Address 27382 Silver Creek Drive

City State Zip Code
San Juan Capistran CA 92675-1524

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Region Head of Sales W

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-556

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Edward Tanida

Mailing Address 7 Sugar Hollow Lane

City State Zip Code
West Simsbury CT 06092-2312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Region Network Operations Head

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-457

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Martha R. Temple

Mailing Address Rr#1 194 Little Lane

City State Zip Code
Durham CT 06422-1303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Local Market Head NE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-341

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Gary J. Thomas

Mailing Address 46 Princeton Drive

City Avon State CT Zip Code 06001-3199

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Head of Medicare

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.01

Date of Receipt 03 / 19 / 2010

Transaction ID: 031610-517

Amount of Each Receipt this Period 166.67

B.

Full Name (Last, First, Middle Initial)
Jay E. Timm

Mailing Address 715 Brentwood Boulevard

City Copley State OH Zip Code 44321-1478

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Local Market Head MA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 19 / 2010

Transaction ID: 031610-412

Amount of Each Receipt this Period 150.00

C.

Full Name (Last, First, Middle Initial)
Jonathan M. Topodas

Mailing Address 10314 Regency Station Drive

City Fairfax Station State VA Zip Code 22039-1800

FEC ID number of contributing federal political committee. **C**

Name of Employer Aetna Inc. Occupation Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2010

Transaction ID: 031610-220

Amount of Each Receipt this Period 100.00

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 55 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Louis E. Ursini, Jr.

Mailing Address 31 Deveron Drive

City State Zip Code
Madison CT 06443-3467

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Hd, Program & Applic Delivery

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-316

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
David Van Dyk

Mailing Address 1422 South Hazel

City State Zip Code
Gilbert AZ 85296-9769

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Hd, RE Lease Mgmt & Strategy

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 413.76

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-198

Amount of Each Receipt this Period

137.92

C.

Full Name (Last, First, Middle Initial)
Marcia J. Wade

Mailing Address 60 Sutton Place South

City State Zip Code
New York NY 10022-4168

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Senior Medical Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-188

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

337.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 80
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Teresa Wankum

Mailing Address 400 Appian Way

City State Zip Code
Doylestown PA 18901-2046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head of National Customer Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-518

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Stacie J. Watson

Mailing Address 49 Brookline Drive

City State Zip Code
West Hartford CT 06107-1265

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Sr Mgr Strategy & Product Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-564

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Allyn M. Weibert

Mailing Address 158 Birch Hill Road

City State Zip Code
Stowe VT 05672-4633

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Bus Project Program Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-370

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **325.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Geoffrey E. Wiczynski	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 1066 Serrano Court	Transaction ID: 031610-336
	City State Zip Code Lafayette CA 94549-3123	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Aetna Inc. Occupation CFO, West Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Martha L. Wofford	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 3 Pine Edge Way	Transaction ID: 031610-95
	City State Zip Code Hatfield MA 01038-9790	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Aetna Inc. Occupation Hd, Product & Strategy- LE&C Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) James P. Wolf	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 9495 River Lake Drive	Transaction ID: 031610-546
	City State Zip Code Roswell GA 30075-5037	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Aetna Inc. Occupation Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	350.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
William S. Wood

Mailing Address 14051 Pointe Anne Drive

City State Zip Code
Odessa FL 33556-4301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-100

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Elease E. Wright

Mailing Address 205 Girard Avenue

City State Zip Code
Hartford CT 06105-2234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Head Of Ahr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.98

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-255

Amount of Each Receipt this Period
416.66

C. Full Name (Last, First, Middle Initial)
Scott D. Yokley

Mailing Address 1603 Wood Song Drive

City State Zip Code
Sugar Land TX 77479-6492

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Market Head of Sales & Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.50

Date of Receipt
MM / DD / YYYY
03 / 19 / 2010

Transaction ID: 031610-476

Amount of Each Receipt this Period
97.50

SUBTOTAL of Receipts This Page (optional) ▶ **614.16**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Patrick R. Young

Mailing Address 2926 Comfort Road

City State Zip Code
New Hope PA 18938-5620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Local Market Head NE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-445

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Thomas A. Young

Mailing Address 51 Back Land Road

City State Zip Code
South Glastonbury CT 06073-3127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Chief Compliance Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-304

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
Elizabeth A. Yurkanin

Mailing Address 1307 Canyon Ridge Drive

City State Zip Code
Broadbrook CT 06016-5608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aetna Inc. Site Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2010

Transaction ID: 031610-272

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional) ▶

525.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 60 / 80	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Joseph Zubretsky		Date of Receipt																					
	Mailing Address 357 River Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	9		2	0	1	0														
	City	State	Zip Code		Transaction ID: 031610-164																			
	Deep River	CT	06417-2121																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Aetna Inc.		Occupation EVP, Chief Financial Officer		<input type="text" value="416.66"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		<input type="text" value="1249.98"/>																						

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="416.66"/>
TOTAL This Period (last page this line number only)	<input type="text" value="27916.70"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Committee To Elect Chris Murphy</p> <p>Mailing Address PO Box 127</p> <p>City Cheshire State CT Zip Code 06410</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Christopher S. Murphy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 700F84C74C5ECD8A4A6</p> <p>Date of Disbursement 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Dave Camp for Congress 2010</p> <p>Mailing Address 5915 Eastman Avenue Suite 100</p> <p>City Midland State MI Zip Code 48640</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Dave Camp</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 56BFCAB123E1C6F120F</p> <p>Date of Disbursement 03 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress</p> <p>Mailing Address Post Office Box 9336</p> <p>City Fargo State ND Zip Code 58106</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Earl Pomeroy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81E58A78230B621D529</p> <p>Date of Disbursement 03 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress <hr/> Mailing Address Post Office Box 9336 <hr/> City Fargo State ND Zip Code 58106 <hr/> Purpose of Disbursement Contribution	Transaction ID: F1B396E7DFFD818CEC6 Date of Disbursement 03 / 12 / 2010 <hr/> Amount of Each Disbursement this Period 500.00		
		Candidate Name Earl Pomeroy	011 Category/ Type
		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Every Republican Is Crucial (ERICPAC) <hr/> Mailing Address 25 East Main Street, Suite 200 <hr/> City Richmond State VA Zip Code 23219 <hr/> Purpose of Disbursement 2010 Contribution	Transaction ID: B4346B65DC73EC9E2B0 Date of Disbursement 03 / 11 / 2010 <hr/> Amount of Each Disbursement this Period 5000.00		
		Candidate Name Every Republican Is Crucial (ERICPAC)	011 Category/ Type
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
		Contribution	
C. Full Name (Last, First, Middle Initial) Gillibrand for Senate <hr/> Mailing Address 313 C Street NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Contribution	Transaction ID: 4B92EA70E401048AB4B Date of Disbursement 03 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 1500.00		
		Candidate Name Kirsten E. Gillibrand	011 Category/ Type
		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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 Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Montana Democratic Party <hr/> Mailing Address PO Box 802 ----- City Helena State MT Zip Code 59624 Purpose of Disbursement 2010 Contribution Candidate Name Montana Democratic Party Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	Transaction ID: 7FC5D3B3DC361A1D651 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/Type
B. Full Name (Last, First, Middle Initial) Orrinpac <hr/> Mailing Address 175 S. West Temple, Suite 650 City Salt Lake City State UT Zip Code 84101 Purpose of Disbursement 2010 Contribution Candidate Name Orrinpac Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	Transaction ID: 3A237101ACD5E183BD Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	011 Category/Type
C. Full Name (Last, First, Middle Initial) Republican Mainstreet Partnership Pac <hr/> Mailing Address C/O G & W 2201 Wisconsin Ave. NW Suite 320 City Washington State DC Zip Code 20007 Purpose of Disbursement Contribution Candidate Name Republican Mainstreet Partnership Pac Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	Transaction ID: D6B3A8C1F0A581406A0 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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 Page

FOR 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Rogers for Congress <hr/> Mailing Address PO Box 581 <hr/> City Brighton State MI Zip Code 48116 <hr/> Purpose of Disbursement Contribution Candidate Name Mike Rogers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 8E47E2C91581A15CBEA Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ryan for Congress <hr/> Mailing Address PO Box 1919 <hr/> City Janesville State WI Zip Code 53547 <hr/> Purpose of Disbursement Contribution Candidate Name Paul Ryan Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 94A3D2556CD70156C56 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Simmons for Senate <hr/> Mailing Address Post Office Box 268 <hr/> City Stonington State CT Zip Code 06378 <hr/> Purpose of Disbursement Contribution Candidate Name Robert R. Simmons Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: F6E35B29A5FFDAE539F Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 65 / 80

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Tiberi for Congress <hr/> Mailing Address 2931 E Dublin Granville Road Suite 190 <hr/> City Columbus State OH Zip Code 43231 <hr/> Purpose of Disbursement Contribution <input type="text" value="011"/> Candidate Name Pat Tiberi <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 12	Transaction ID: EF99A623D137DB06680 Date of Disbursement <input type="text" value="03"/> <input type="text" value="03"/> / <input type="text" value="11"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/>
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
B. Full Name (Last, First, Middle Initial) Whitfield for Congress Committee <hr/> Mailing Address PO Box 391 <hr/> City Hopkinsville State KY Zip Code 42241 <hr/> Purpose of Disbursement Contribution <input type="text" value="011"/> Candidate Name Edward Whitfield <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District: 01	Transaction ID: A3092A970611100ABD4 Date of Disbursement <input type="text" value="03"/> <input type="text" value="03"/> / <input type="text" value="02"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/> <input type="text" value="10"/>
	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>

SUBTOTAL of Disbursements This Page (optional) ►

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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Batchelder for Representative Committee</p> <p>Mailing Address 105 W. Liberty Street</p> <p>City Medina State OH Zip Code 44256</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E87C5D858FE8D80142A Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Byron Cook for Texas House</p> <p>Mailing Address P. O. Box 1397</p> <p>City Corsicana State TX Zip Code 75151</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5B32B1EE526A410F933 Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Carlos Uresti Campaign</p> <p>Mailing Address P. O. Box 240431</p> <p>City San Antonio State TX Zip Code 78224</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 52C281B52692DDF5621 Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 68 / 80

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Charlie Geren Campaign <hr/> Mailing Address P. O. Box 1440 <hr/> City Fort Worth State TX Zip Code 76101 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 05B751C10A9E8512B44 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Citizens for Buehrer <hr/> Mailing Address 705 Greenview Drive <hr/> City Delta State OH Zip Code 43515 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2A438E8163622065326 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Citizens for Carey <hr/> Mailing Address 401 S. Arkansas Avenue <hr/> City Welleston State OH Zip Code 45692 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 734CD8F9F63AD662267 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 69 / 80

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Citizens for Hottinger</p> <p>Mailing Address 386 Sabrecutt Drive</p> <p>City Newark State OH Zip Code 43055</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 697C2650F134CB884F6 Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Citizens to Elect Dan Dodd</p> <p>Mailing Address 106 N. Main Street</p> <p>City New Lexington State OH Zip Code 43764</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6701789787CE59A73C Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Niehaus</p> <p>Mailing Address 1131 Little Indian Creek Road</p> <p>City New Richmond State OH Zip Code 45157</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0427E6F0FBED2999DB2 Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Craig Eiland Campaign <hr/> Mailing Address 2423 Market Street <hr/> City Galveston State TX Zip Code 77550-0000 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9995F9446FE2A5D2C8A Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Dan Huberty Campaign <hr/> Mailing Address 18814 Rusty Anchor Court <hr/> City Humble State TX Zip Code 77346 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B03D2F9146BE3FA7D02 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) David Dewhurst Committee <hr/> Mailing Address P. O. Box 756 <hr/> City Austin State TX Zip Code 78767 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7275FFD4674ECEA5166 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Dennis Bonnen Campaign <hr/> Mailing Address 122 E. Myrtle Street <hr/> City Angleton State TX Zip Code 77515 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 42396C4CD943C144354 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Doug Miller for State Representative <hr/> Mailing Address P. O. Box 312037 <hr/> City New Braufels State TX Zip Code 78131 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7A2834D3FCDEE578F2C Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Estes for Texas Senate <hr/> Mailing Address P., O. Box 8287 <hr/> City Wichita Falls State TX Zip Code 76307 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 8A4AA6F84ACCC49EF69 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Fred Brown Campaign <hr/> Mailing Address 1207 Brook Hollow Drive <hr/> City Bryan State TX Zip Code 77802 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4237CF7C3623CF44412 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Friends of Armond Budish <hr/> Mailing Address 23240 Chagrin Blvd Bldy 4 Suite 450 <hr/> City Beachwood State OH Zip Code 44133 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: FF43668224A7ADED81C Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Friends of Brandon Creighton <hr/> Mailing Address 715 W. Davis Street Box 265 <hr/> City Conroe State TX Zip Code 77301 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D010913652134648056 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3000.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Friends of Dominic Pileggi</p> <p>Mailing Address 101 West Baltimore Ave 2nd Floor</p> <p>City Media State PA Zip Code 19063</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 088F9F91CF3850EB280</p> <p>Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Jane Nelson</p> <p>Mailing Address PO Box 270389</p> <p>City Flower Mount State TX Zip Code 75027-0000</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 4841C5C255EA670ECE1</p> <p>Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Joe Scarnati</p> <p>Mailing Address P. O. Box 177</p> <p>City Brockway State PA Zip Code 15824</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1D9E3D9D1114D9F019</p> <p>Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	3500.00
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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Friends of John Zerwas <hr/> Mailing Address 1012 Morton Street <hr/> City Richmond State TX Zip Code 77469 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: C851453F70D2F6652F0 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Jim Pitts Campaign <hr/> Mailing Address P. O. Box 561 <hr/> City Waxahachie State TX Zip Code 75168 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 682A0DC5432C871C2B0 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) John Whitmire Campaign <hr/> Mailing Address 321 West Cowan <hr/> City Houston State TX Zip Code 77007 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 623CAD00DE29756FDF4 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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 Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Kelly Hancock Campaign <hr/> Mailing Address P. O. Box 821349 <hr/> City N. Richland Hills State TX Zip Code 76182 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 08E0BEC02477B6F669C Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kevin Eltife Campaign <hr/> Mailing Address 417 South College <hr/> City Tyler State TX Zip Code 75702 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: DDAE52F2195AEE7F246 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1500.00
	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Larry Taylor Campaign <hr/> Mailing Address PO Box 1208 <hr/> City Friendswood State TX Zip Code 77549 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: F0F089615FFE48AE764 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Lois Kolkhorst Campaign <hr/> Mailing Address P. O. Box 2546 <hr/> City Brenham State TX Zip Code 77834 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CAB98D7A201F8640C0E Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mark Homer Campaign <hr/> Mailing Address 1849 Lamar Avenue <hr/> City Paris State TX Zip Code 75460 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 497CE0114F68CD1C013 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Pete Gallego Campaign <hr/> Mailing Address P. O. Box 777 <hr/> City Alpine State TX Zip Code 79831 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: C2BEC3983FB463AA71D Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Rafael Anchia Campaign <hr/> Mailing Address P. O.Box 4468 <hr/> City Dallas State TX Zip Code 75208 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 89F1D9FD0BC2D7492B3 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Robert Duncan Campaign <hr/> Mailing Address PO Box 2309 <hr/> City Lubbock State TX Zip Code 79408-0000 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 6C2F801178F7E2768EF Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Senfronia Thompson Campaign <hr/> Mailing Address 10527 Homestead Road <hr/> City Houston State TX Zip Code 77016-0000 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: ED6BC2E2A00251605DD Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Texans for Dan Branch</p> <p>Mailing Address 2100 McKinney Avenue Suite 1501A</p> <p>City Dallas State TX Zip Code 75201</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E1E53F0707ADB70BD3B Date of Disbursement: 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Texans for Dan Patrick</p> <p>Mailing Address 5300 Memorial Suite 1070</p> <p>City Houston State TX Zip Code 77007</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6793CDF5F8CF4D849A Date of Disbursement: 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Texans for Joan Huffman</p> <p>Mailing Address 3375 Westpark Drive Suite 135</p> <p>City Houston State TX Zip Code 77005</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B74301329CB00AF1643 Date of Disbursement: 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/Type</p>

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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Aetna Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) The Rob Eissler Campaign</p> <p>Mailing Address 431 Nursery Road B-400</p> <p>City The Woodlands State TX Zip Code 77380</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7D915584A35FC7889FE Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Todd Hunter Campaign</p> <p>Mailing Address 14617 S. Padre Island Drive</p> <p>City Corpus Christi State TX Zip Code 78418</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 0952A7FCF5F868A6B90 Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Trey Martinez Fisher Campaign</p> <p>Mailing Address 600 Navarro Street Suite 500</p> <p>City San Antonio State TX Zip Code 78205</p> <p>Purpose of Disbursement Nonfederal Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: DEAFCA2462809443ADC Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

38500.00