

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
PharMerica Corporation Political Action Committee PPAC

ADDRESS (number and street) 1901 Campus Place
 Check if different than previously reported. (ACC)
Louisville KY 40299

2. **FEC IDENTIFICATION NUMBER** C00397455
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 08 01 2008 through 08 31 2008

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

Type or Print Name of Treasurer Teri Hartlage

Signature of Treasurer Electronically Filed by Teri Hartlage Date 09 09 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		91665.60
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	97459.89									
(c) Total Receipts (from Line 19)	7393.78	19188.07								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	104853.67	110853.67								
7. Total Disbursements (from Line 31)	0.00	6000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	104853.67	104853.67								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	7078.84	11816.51
(i) Itemized (use Schedule A)		
(ii) Unitemized	314.94	7371.56
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7393.78	19188.07
(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)	7393.78	19188.07
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	0.00
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))	7393.78	19188.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7393.78	19188.07

DETAILED SUMMARY PAGE

of Disbursements

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.....	0.00	6000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
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))..	0.00	6000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	6000.00

DETAILED SUMMARY PAGE
of Disbursements

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)	7393.78	19188.07
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7393.78	19188.07
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: (check only one)	PAGE 6 / 30
	<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)
PharMerica Corporation Political Action Committee PPAC

A.	Full Name (Last, First, Middle Initial) Michael Andrews	Date of Receipt MM / DD / YYYY 08 / 08 / 2008
	Mailing Address 24712 231st Ave SE	Transaction ID: 081408-22
	City State Zip Code Maple Valley WA 98038	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.66	

B.	Full Name (Last, First, Middle Initial) Michael Andrews	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 24712 231st Ave SE	Transaction ID: 082208-4
	City State Zip Code Maple Valley WA 98038	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.66	

C.	Full Name (Last, First, Middle Initial) Charles Ashy	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 4406 Effie St	Transaction ID: 080108-31
	City State Zip Code Bellaire TX 77401	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
Name of Employer Pharmerica	Occupation Director, Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 323.04	

SUBTOTAL of Receipts This Page (optional)	▶	60.57
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 7 / 30
	<input checked="" 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)
PharMerica Corporation Political Action Committee PPAC

A.	Full Name (Last, First, Middle Initial) Charles Ashy	Date of Receipt
	Mailing Address 4406 Effie St	<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 0 8 / 1 5 / 2 0 0 8
	City State Zip Code Bellaire TX 77401	Transaction ID: 081508-30
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 20.19
Name of Employer Pharmerica	Occupation Director, Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 323.04	

B.	Full Name (Last, First, Middle Initial) Charles Ashy	Date of Receipt
	Mailing Address 4406 Effie St	<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 0 8 / 2 9 / 2 0 0 8
	City State Zip Code Bellaire TX 77401	Transaction ID: 082908-30
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 20.19
Name of Employer Pharmerica	Occupation Director, Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 323.04	

C.	Full Name (Last, First, Middle Initial) Tracy Atkinson	Date of Receipt
	Mailing Address 22 Evening Star Lp	<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 0 8 / 0 1 / 2 0 0 8
	City State Zip Code Edgewood NM 87015	Transaction ID: 080108-30
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 25.00
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 400.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 65.38
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 8 / 30
(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)
PharMerica Corporation Political Action Committee PPAC

A.

Full Name (Last, First, Middle Initial) Tracy Atkinson		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>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	5		2	0	0	8													
Mailing Address 22 Evening Star Lp		Transaction ID: 081508-29																				
City <u>Edgewood</u>	State NM	Zip Code 87015																				
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>25.00</td></tr> </table>	25.00																			
25.00																						
Name of Employer Pharmerica	Occupation Manager, General																					
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>400.00</td></tr> </table>	400.00																				
400.00																						

B.

Full Name (Last, First, Middle Initial) Tracy Atkinson		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>8</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	9		2	0	0	8													
Mailing Address 22 Evening Star Lp		Transaction ID: 082908-29																				
City <u>Edgewood</u>	State NM	Zip Code 87015																				
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>25.00</td></tr> </table>	25.00																			
25.00																						
Name of Employer Pharmerica	Occupation Manager, General																					
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>400.00</td></tr> </table>	400.00																				
400.00																						

C.

Full Name (Last, First, Middle Initial) John Baughman		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>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	1		2	0	0	8													
Mailing Address 2432 Atchison Ave		Transaction ID: 080108-27																				
City <u>Lawrence</u>	State KS	Zip Code 66047																				
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>25.00</td></tr> </table>	25.00																			
25.00																						
Name of Employer Pharmerica	Occupation Lead Consultant																					
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>400.00</td></tr> </table>	400.00																				
400.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"> <tr><td>75.00</td></tr> </table>	75.00
75.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%; height: 20px;"> <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: (check only one)	PAGE 9 / 30
	<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)
PharMerica Corporation Political Action Committee PPAC

A.	Full Name (Last, First, Middle Initial) John Baughman	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 2432 Atchison Ave	Transaction ID: 081508-26
	City State Zip Code Lawrence KS 66047	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Lead Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) John Baughman	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 2432 Atchison Ave	Transaction ID: 082908-26
	City State Zip Code Lawrence KS 66047	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Lead Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Hill Boyett	Date of Receipt MM / DD / YYYY 08 / 08 / 2008
	Mailing Address 137 Tatershall	Transaction ID: 081408-20
	City State Zip Code Macon GA 31210	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.66	

SUBTOTAL of Receipts This Page (optional)	▶	70.19
TOTAL This Period (last page this line number 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 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PharMerica Corporation Political Action Committee PPAC

A. Full Name (Last, First, Middle Initial)
Hill Boyett

Mailing Address 137 Tatershall

City Macon State GA Zip Code 31210

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 282.66

Date of Receipt 08 / 22 / 2008
Transaction ID: 082208-2
Amount of Each Receipt this Period 20.19

B. Full Name (Last, First, Middle Initial)
David Cole

Mailing Address 1213 Augusta Drive

City Shelbyville State KY Zip Code 40065

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 08 / 2008
Transaction ID: 081408-24
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
David Cole

Mailing Address 1213 Augusta Drive

City Shelbyville State KY Zip Code 40065

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 22 / 2008
Transaction ID: 082208-6
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 70.19

TOTAL This Period (last page this line number 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 / 30
(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)
PharMerica Corporation Political Action Committee PPAC

A.

Full Name (Last, First, Middle Initial)
Michael Culotta

Mailing Address 2003 Arnold Palmer Blvd

City State Zip Code
Louisville KY 40245-5197

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

Name of Employer Occupation
Pharmerica EVP, Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2008

Transaction ID: 172b653c6e4a3d4bda7

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
Patrick Daugherty

Mailing Address 2711 Gulf Drive

City State Zip Code
Holmes Beach FL 34217

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

Name of Employer Occupation
Pharmerica Director, Regional Reimbursement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
323.04

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: 080108-7

Amount of Each Receipt this Period
20.19

C.

Full Name (Last, First, Middle Initial)
Patrick Daugherty

Mailing Address 2711 Gulf Drive

City State Zip Code
Holmes Beach FL 34217

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

Name of Employer Occupation
Pharmerica Director, Regional Reimbursement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
323.04

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: 081508-7

Amount of Each Receipt this Period
20.19

SUBTOTAL of Receipts This Page (optional) ► **5040.38**

TOTAL This Period (last page this line number 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 / 30
(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)
PharMerica Corporation Political Action Committee PPAC

A.

Full Name (Last, First, Middle Initial)
Patrick Daugherty

Mailing Address 2711 Gulf Drive

City State Zip Code
Holmes Beach FL 34217

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

Name of Employer Occupation
Pharmerica Director, Regional Reimbursement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.04

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: 082908-7

Amount of Each Receipt this Period
20.19

B.

Full Name (Last, First, Middle Initial)
Todd Dipprey

Mailing Address 1401 7th

City State Zip Code
Shallowater TX 79363

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

Name of Employer Occupation
Pharmerica Manager, General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.04

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: 080108-20

Amount of Each Receipt this Period
20.19

C.

Full Name (Last, First, Middle Initial)
Todd Dipprey

Mailing Address 1401 7th

City State Zip Code
Shallowater TX 79363

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

Name of Employer Occupation
Pharmerica Manager, General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.04

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: 081508-19

Amount of Each Receipt this Period
20.19

SUBTOTAL of Receipts This Page (optional) ► **60.57**

TOTAL This Period (last page this line 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 / 30
	<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)
PharMerica Corporation Political Action Committee PPAC

A.	Full Name (Last, First, Middle Initial) Todd Dipprey		Date of Receipt MM / DD / YYYY 08 / 29 / 2008		
	Mailing Address 1401 7th		Transaction ID: 082908-19		
	City Shallowater	State TX	Zip Code 79363	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. C				
Name of Employer Pharmerica		Occupation Manager, General			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 323.04			

B.	Full Name (Last, First, Middle Initial) Ronald Finch		Date of Receipt MM / DD / YYYY 08 / 01 / 2008		
	Mailing Address 12236 Juniper		Transaction ID: 080108-25		
	City Overland Park	State KS	Zip Code 66209	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. C				
Name of Employer Pharmerica		Occupation Manager, General			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 323.04			

C.	Full Name (Last, First, Middle Initial) Ronald Finch		Date of Receipt MM / DD / YYYY 08 / 15 / 2008		
	Mailing Address 12236 Juniper		Transaction ID: 081508-24		
	City Overland Park	State KS	Zip Code 66209	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. C				
Name of Employer Pharmerica		Occupation Manager, General			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 323.04			

SUBTOTAL of Receipts This Page (optional)	▶	60.57
TOTAL This Period (last page this line number 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 / 30

(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)
PharMerica Corporation Political Action Committee PPAC

A.

Full Name (Last, First, Middle Initial)
Ronald Finch

Mailing Address 12236 Juniper

City State Zip Code
Overland Park KS 66209

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

Name of Employer Occupation
PharMerica Manager, General

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 323.04

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: 082908-24

Amount of Each Receipt this Period
20.19

B.

Full Name (Last, First, Middle Initial)
Christopher G. Flori

Mailing Address 2011 Frankfort Avenue
209

City State Zip Code
Louisville KY 40206

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

Name of Employer Occupation
PharMerica Vice President, Product Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt

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

Transaction ID: 080108-5

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Christopher G. Flori

Mailing Address 2011 Frankfort Avenue
209

City State Zip Code
Louisville KY 40206

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

Name of Employer Occupation
PharMerica Vice President, Product Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: 081508-5

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

120.19

TOTAL This Period (last page this line 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 15 / 30		
	<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

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)
PharMerica Corporation Political Action Committee PPAC

A.

Full Name (Last, First, Middle Initial) Christopher G. Flori		Date of Receipt MM / DD / YYYY 08 / 29 / 2008
Mailing Address 2011 Frankfort Avenue # 209		Transaction ID: 082908-5
City Louisville	State KY	Zip Code 40206
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer PharMerica	Occupation Vice President, Product Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

B.

Full Name (Last, First, Middle Initial) Linda K. Gelalia		Date of Receipt MM / DD / YYYY 08 / 01 / 2008
Mailing Address 9539 Norchester Cir		Transaction ID: 080108-12
City Tampa	State FL	Zip Code 33647
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer PharMerica	Occupation Director, Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.

Full Name (Last, First, Middle Initial) Linda K. Gelalia		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 9539 Norchester Cir		Transaction ID: 081508-11
City Tampa	State FL	Zip Code 33647
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer PharMerica	Occupation Director, Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 30

(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)
PharMerica Corporation Political Action Committee PPAC

A. Full Name (Last, First, Middle Initial)
Linda K. Gelalia

Mailing Address 9539 Norchester Cir

City Tampa State FL Zip Code 33647

FEC ID number of contributing federal political committee. C

Name of Employer PharMerica Occupation Director, Process Improvement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
08 / 29 / 2008

Transaction ID: 082908-11

Amount of Each Receipt this Period 25.00

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

Mailing Address 10903 Ledgement Ln

City Windermere State FL Zip Code 34786

FEC ID number of contributing federal political committee. C

Name of Employer Pharmacia Occupation Manager, General

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
08 / 01 / 2008

Transaction ID: 080108-18

Amount of Each Receipt this Period 25.00

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

Mailing Address 10903 Ledgement Ln

City Windermere State FL Zip Code 34786

FEC ID number of contributing federal political committee. C

Name of Employer Pharmacia Occupation Manager, General

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
08 / 15 / 2008

Transaction ID: 081508-17

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) 75.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PharMerica Corporation Political Action Committee PPAC

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

Mailing Address 10903 Ledge ment Ln

City State Zip Code
Windermere FL 34786

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

Name of Employer Occupation
Pharmerica Manager, General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: 082908-17

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Pamela Johnson

Mailing Address 4021 Audubon Drive

City State Zip Code
Largo FL 33771

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

Name of Employer Occupation
Pharmerica Manager, General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: 080108-11

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Pamela Johnson

Mailing Address 4021 Audubon Drive

City State Zip Code
Largo FL 33771

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

Name of Employer Occupation
Pharmerica Manager, General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: 081508-10

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 30
	<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)
PharMerica Corporation Political Action Committee PPAC

A.	Full Name (Last, First, Middle Initial) Pamela Johnson		Date of Receipt
	Mailing Address 4021 Audubon Drive		<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Largo	FL	33771
	FEC ID number of contributing federal political committee. C		Transaction ID: 082908-10
Name of Employer PharMerica		Occupation Manager, General	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" value="400.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Mark Kirasich		Date of Receipt
	Mailing Address 7185 Crystal View Dr Se		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Caleoonia	MI	49316
	FEC ID number of contributing federal political committee. C		Transaction ID: 081408-12
Name of Employer PharMerica		Occupation Manager, General	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" value="282.66"/>	<input type="text" value="20.19"/>

C.	Full Name (Last, First, Middle Initial) Mark Kirasich		Date of Receipt
	Mailing Address 7185 Crystal View Dr Se		<input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Caleoonia	MI	49316
	FEC ID number of contributing federal political committee. C		Transaction ID: 082208-3
Name of Employer PharMerica		Occupation Manager, General	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" value="282.66"/>	<input type="text" value="20.19"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="65.38"/>
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: (check only one)	PAGE 19 / 30
	<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)
PharMerica Corporation Political Action Committee PPAC

A.	Full Name (Last, First, Middle Initial) Barbara Klinkel		Date of Receipt
	Mailing Address 2928 Falls		<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
	City	State	Zip Code
	Rapid City	SD	57702
	FEC ID number of contributing federal political committee. C		Transaction ID: 080108-23
Name of Employer Pharmerica		Occupation Manager, General	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 ▼ 400.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) Barbara Klinkel		Date of Receipt
	Mailing Address 2928 Falls		<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
	City	State	Zip Code
	Rapid City	SD	57702
	FEC ID number of contributing federal political committee. C		Transaction ID: 081508-22
Name of Employer Pharmerica		Occupation Manager, General	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 ▼ 400.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Barbara Klinkel		Date of Receipt
	Mailing Address 2928 Falls		<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
	City	State	Zip Code
	Rapid City	SD	57702
	FEC ID number of contributing federal political committee. C		Transaction ID: 082908-22
Name of Employer Pharmerica		Occupation Manager, General	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 ▼ 400.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
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 20 / 30
(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)
PharMerica Corporation Political Action Committee PPAC

A.

Full Name (Last, First, Middle Initial) Michael Koski		Date of Receipt MM / DD / YYYY 08 / 08 / 2008
Mailing Address 1310 Jersey Ave N		Transaction ID: 081408-26
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.00
Name of Employer PharMerica	Occupation Pharmacy Ops Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	

B.

Full Name (Last, First, Middle Initial) Michael Koski		Date of Receipt MM / DD / YYYY 08 / 22 / 2008
Mailing Address 1310 Jersey Ave N		Transaction ID: 082208-8
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.00
Name of Employer PharMerica	Occupation Pharmacy Ops Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	

C.

Full Name (Last, First, Middle Initial) Larry A. Litzmann		Date of Receipt MM / DD / YYYY 08 / 01 / 2008
Mailing Address 17402 Streamside Place		Transaction ID: 080108-19
City Louisville	State KY	Zip Code 40245
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer PharMerica	Occupation Svp, Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	

SUBTOTAL of Receipts This Page (optional)	▶	142.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 30
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
PharMerica Corporation Political Action Committee PPAC

A.

Full Name (Last, First, Middle Initial)
Larry A. Litzmann

Mailing Address 17402 Streamside Place

City State Zip Code
Louisville KY 40245

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

Name of Employer Occupation
PharMerica Svp, Account Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: 081508-18

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Larry A. Litzmann

Mailing Address 17402 Streamside Place

City State Zip Code
Louisville KY 40245

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

Name of Employer Occupation
PharMerica Svp, Account Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: 082908-18

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Michael Martin

Mailing Address 4769 Greenview Ct

City State Zip Code
Commerce MI 48382

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

Name of Employer Occupation
Pharmerica Manager, General

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.66

Date of Receipt
MM / DD / YYYY
08 / 08 / 2008

Transaction ID: 081408-14

Amount of Each Receipt this Period
20.19

SUBTOTAL of Receipts This Page (optional) ▶ **220.19**

TOTAL This Period (last page this line 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 22 / 30
	<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)
PharMerica Corporation Political Action Committee PPAC

A.	Full Name (Last, First, Middle Initial) Michael Martin	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 4769 Greenview Ct	Transaction ID: 082208-5
	City State Zip Code Commerce MI 48382	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.66	

B.	Full Name (Last, First, Middle Initial) Jay Palin	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 10528 Chestnut Hill	Transaction ID: 080108-21
	City State Zip Code Fishers IN 46038	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica Vice President, Ltc Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00	

C.	Full Name (Last, First, Middle Initial) Jay Palin	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 10528 Chestnut Hill	Transaction ID: 081508-20
	City State Zip Code Fishers IN 46038	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica Vice President, Ltc Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00	

SUBTOTAL of Receipts This Page (optional)	100.19
TOTAL This Period (last page this line 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 23 / 30
	<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)
PharMerica Corporation Political Action Committee PPAC

A. Full Name (Last, First, Middle Initial)
Jay Palin

Mailing Address 10528 Chestnut Hill

City Fishers State IN Zip Code 46038

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

Name of Employer PharMerica Occupation Vice President, Ltc Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt 08 / 29 / 2008

Transaction ID: 082908-20

Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Timothy M. Rowland

Mailing Address 5952 Jaegerglen Dr

City Lithia State FL Zip Code 33547

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

Name of Employer PharMerica Occupation Director, Operations Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.04

Date of Receipt 08 / 01 / 2008

Transaction ID: 080108-17

Amount of Each Receipt this Period 20.19

C. Full Name (Last, First, Middle Initial)
Timothy M. Rowland

Mailing Address 5952 Jaegerglen Dr

City Lithia State FL Zip Code 33547

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

Name of Employer PharMerica Occupation Director, Operations Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.04

Date of Receipt 08 / 15 / 2008

Transaction ID: 081508-16

Amount of Each Receipt this Period 20.19

SUBTOTAL of Receipts This Page (optional) ▶ 80.38

TOTAL This Period (last page this line number 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 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PharMerica Corporation Political Action Committee PPAC

<p>A. Full Name (Last, First, Middle Initial) Timothy M. Rowland</p> <p>Mailing Address 5952 Jaegerglen Dr</p> <p>City State Zip Code Lithia FL 33547</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation PharMerica Director, Operations Support</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 323.04</p>	<p>Date of Receipt 08 / 29 / 2008</p> <p>Transaction ID: 082908-16</p> <p>Amount of Each Receipt this Period 20.19</p>
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<p>B. Full Name (Last, First, Middle Initial) Janice Rutkowski</p> <p>Mailing Address 1110 Abbeys Way</p> <p>City State Zip Code Tampa FL 33602</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation PharMerica Svp, Clinical Services & Prog Dev</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1230.72</p>	<p>Date of Receipt 08 / 01 / 2008</p> <p>Transaction ID: 080108-2</p> <p>Amount of Each Receipt this Period 76.92</p>
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<p>C. Full Name (Last, First, Middle Initial) Janice Rutkowski</p> <p>Mailing Address 1110 Abbeys Way</p> <p>City State Zip Code Tampa FL 33602</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation PharMerica Svp, Clinical Services & Prog Dev</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1230.72</p>	<p>Date of Receipt 08 / 15 / 2008</p> <p>Transaction ID: 081508-2</p> <p>Amount of Each Receipt this Period 76.92</p>
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SUBTOTAL of Receipts This Page (optional)	174.03
TOTAL This Period (last page this line number 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 / 30
(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)
PharMerica Corporation Political Action Committee PPAC

<p>A. Full Name (Last, First, Middle Initial) Janice Rutkowski</p> <p>Mailing Address 1110 Abbeys Way</p> <p>City Tampa State FL Zip Code 33602</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer PharMerica Occupation Svp, Clinical Services & Prog Dev</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1230.72</p>	<p>Date of Receipt 08 / 29 / 2008</p> <p>Transaction ID: 082908-2</p> <p>Amount of Each Receipt this Period 76.92</p>
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<p>B. Full Name (Last, First, Middle Initial) Kari Shanard-Koenders</p> <p>Mailing Address 3005 Spruceleigh Ct</p> <p>City Sioux Falls State SD Zip Code 57105</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Pharmacia Occupation Utilization Management Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 323.04</p>	<p>Date of Receipt 08 / 01 / 2008</p> <p>Transaction ID: 080108-24</p> <p>Amount of Each Receipt this Period 20.19</p>
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<p>C. Full Name (Last, First, Middle Initial) Kari Shanard-Koenders</p> <p>Mailing Address 3005 Spruceleigh Ct</p> <p>City Sioux Falls State SD Zip Code 57105</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Pharmacia Occupation Utilization Management Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 323.04</p>	<p>Date of Receipt 08 / 15 / 2008</p> <p>Transaction ID: 081508-23</p> <p>Amount of Each Receipt this Period 20.19</p>
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SUBTOTAL of Receipts This Page (optional)	117.30
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 30
(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)
PharMerica Corporation Political Action Committee PPAC

A.

Full Name (Last, First, Middle Initial)
Kari Shanard-Koenders

Mailing Address 3005 Spruceleigh Ct

City State Zip Code
Sioux Falls SD 57105

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

Name of Employer Occupation
PharMerica Utilization Management Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.04

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: 082908-23

Amount of Each Receipt this Period
20.19

B.

Full Name (Last, First, Middle Initial)
Elizabeth O. Shanks

Mailing Address 1514 Newberger Rd

City State Zip Code
Lutz FL 33549

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

Name of Employer Occupation
PharMerica Regional Director, Account Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: 080108-13

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Elizabeth O. Shanks

Mailing Address 1514 Newberger Rd

City State Zip Code
Lutz FL 33549

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

Name of Employer Occupation
PharMerica Regional Director, Account Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: 081508-12

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **70.19**

TOTAL This Period (last page this line 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 27 / 30
	<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)
PharMerica Corporation Political Action Committee PPAC

A.	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 1514 Newberger Rd	Transaction ID: 082908-12
	City State Zip Code Lutz FL 33549	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Regional Director, Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Wendy Stearns	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 3443 Sunbeam Drive	Transaction ID: 080108-10
	City State Zip Code Sarasota FL 34240	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Director, Clinical Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 323.04	

C.	Full Name (Last, First, Middle Initial) Wendy Stearns	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 3443 Sunbeam Drive	Transaction ID: 081508-9
	City State Zip Code Sarasota FL 34240	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Director, Clinical Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 323.04	

SUBTOTAL of Receipts This Page (optional)	▶	65.38
TOTAL This Period (last page this line number 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 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PharMerica Corporation Political Action Committee PPAC

A. Full Name (Last, First, Middle Initial)
Wendy Stearns

Mailing Address 3443 Sunbeam Drive

City State Zip Code
Sarasota FL 34240

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

Name of Employer Occupation
Pharmerica Director, Clinical Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.04

Date of Receipt
MM / DD / YYYY
08 / 29 / 2008

Transaction ID: 082908-9

Amount of Each Receipt this Period
20.19

B. Full Name (Last, First, Middle Initial)
Alfred Vasquez

Mailing Address 10548 Madison Brooks Dr

City State Zip Code
Fortville IN 46040

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

Name of Employer Occupation
Pharmerica Manager, General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2008

Transaction ID: 082208-7

Amount of Each Receipt this Period
15.00

C. Full Name (Last, First, Middle Initial)
Cheryl Zinn

Mailing Address 4008 September Song

City State Zip Code
Manchaca TX 78652

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

Name of Employer Occupation
Pharmerica Manager, General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.04

Date of Receipt
MM / DD / YYYY
08 / 01 / 2008

Transaction ID: 080108-26

Amount of Each Receipt this Period
20.19

SUBTOTAL of Receipts This Page (optional) ► 55.38

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 30
	(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)
PharMerica Corporation Political Action Committee PPAC

A.	Full Name (Last, First, Middle Initial) Cheryl Zinn		Date of Receipt
	Mailing Address 4008 September Song		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Manchaca	TX	78652
	FEC ID number of contributing federal political committee.		Transaction ID: 081508-25
Name of Employer Pharmerica		Occupation Manager, General	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"/> 323.04	<input type="text"/> 20.19

B.	Full Name (Last, First, Middle Initial) Cheryl Zinn		Date of Receipt
	Mailing Address 4008 September Song		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Manchaca	TX	78652
	FEC ID number of contributing federal political committee.		Transaction ID: 082908-25
Name of Employer Pharmerica		Occupation Manager, General	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"/> 323.04	<input type="text"/> 20.19

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 40.38
TOTAL This Period (last page this line number only)	<input type="text"/> 7078.84

Image# 28932882052

Form/Schedule: **F3X**

Transaction ID:
