

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 Inc. 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 11 01 2007 through 11 30 2007

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 12 19 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
PharMerica Inc. Political Action Committee (PPAC)

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		64827.41
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	88491.75									
(c) Total Receipts (from Line 19)	3187.42	32351.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	91679.17	97179.17								
7. Total Disbursements (from Line 31)	2000.00	7500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	89679.17	89679.17								
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 Inc. Political Action Committee (PPAC)

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	3069.42	19514.18
(i) Itemized (use Schedule A)	118.00	12837.58
(ii) Unitemized	3187.42	32351.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	3187.42	32351.76
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))	3187.42	32351.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3187.42	32351.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	2000.00	7500.00
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))..	2000.00	7500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	2000.00	7500.00

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)	3187.42	32351.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3187.42	32351.76
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Terry Allard		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 2812 Wingren Road		Transaction ID: 110207-10
City Irving State TX Zip Code 75062	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 ▼ 484.56	

Full Name (Last, First, Middle Initial) B. Terry Allard		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 2812 Wingren Road		Transaction ID: 111607-10
City Irving State TX Zip Code 75062	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 ▼ 484.56	

Full Name (Last, First, Middle Initial) C. Terry Allard		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 2812 Wingren Road		Transaction ID: 113007-9
City Irving State TX Zip Code 75062	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 ▼ 484.56	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Michael Andrews		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 24712 231st Ave SE		Transaction ID: 110207-36	
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 ▼ 484.56		

Full Name (Last, First, Middle Initial) B. Michael Andrews		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 24712 231st Ave SE		Transaction ID: 111607-33	
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 ▼ 484.56		

Full Name (Last, First, Middle Initial) C. Michael Andrews		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 24712 231st Ave SE		Transaction ID: 113007-32	
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 ▼ 484.56		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Charles Ashy		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 4406 Effie St		Transaction ID: 110207-9	
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 ▼ 464.37		

Full Name (Last, First, Middle Initial) B. Charles Ashy		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 4406 Effie St		Transaction ID: 111607-9	
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 ▼ 464.37		

Full Name (Last, First, Middle Initial) C. Anthony Astore		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 7 Hempstead Road		Transaction ID: 110207-38	
City State Zip Code Trenton NJ 08610	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Consultant Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Anthony Astore		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 7 Hempstead Road		Transaction ID: 111607-35
City Trenton	State NJ	Zip Code 08610
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Pharmerica	Occupation Consultant Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Anthony Astore		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 7 Hempstead Road		Transaction ID: 113007-34
City Trenton	State NJ	Zip Code 08610
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Pharmerica	Occupation Consultant Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Tracy Atkinson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 22 Evening Star Lp		Transaction ID: 110207-25
City Edgewood	State NM	Zip Code 87015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 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 ▼ 600.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 49
	(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)
PharMerica Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Tracy Atkinson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 22 Evening Star Lp		Transaction ID: 111607-24
City Edgewood	State NM	Zip Code 87015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 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 ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Tracy Atkinson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 22 Evening Star Lp		Transaction ID: 113007-23
City Edgewood	State NM	Zip Code 87015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 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 ▼ 600.00	

Full Name (Last, First, Middle Initial) C. John Baughman		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 2432 Atchison Ave		Transaction ID: 110207-20
City Lawrence	State KS	Zip Code 66047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 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 ▼ 600.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. John Baughman		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 2432 Atchison Ave		Transaction ID: 111607-19	
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 Pharmerica	Occupation Lead Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) B. John Baughman		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 2432 Atchison Ave		Transaction ID: 113007-18	
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 Pharmerica	Occupation Lead Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. Hill Boyett		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 137 Tatershall		Transaction ID: 110207-45	
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 Pharmerica	Occupation Manager, General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 49
	<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 Inc. 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		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7 Transaction ID: 111607-42 Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Manager, General Aggregate Year-to-Date ▼ 484.56	

B. 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		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7 Transaction ID: 113007-41 Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Manager, General Aggregate Year-to-Date ▼ 484.56	

C. Full Name (Last, First, Middle Initial) Joann Camasso Mailing Address 15 NE 20th Ave City Pompano Beach State FL Zip Code 33060 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7 Transaction ID: 110207-43 Amount of Each Receipt this Period 11.54
Name of Employer Pharmerica Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Account Manager Aggregate Year-to-Date ▼ 276.96	

SUBTOTAL of Receipts This Page (optional)	▶	51.92
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Joann Camasso		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 15 NE 20th Ave		Transaction ID: 111607-40
City Pompano Beach	State FL	Zip Code 33060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer Pharmerica	Occupation Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.96	

Full Name (Last, First, Middle Initial) B. Joann Camasso		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 15 NE 20th Ave		Transaction ID: 113007-39
City Pompano Beach	State FL	Zip Code 33060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer Pharmerica	Occupation Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.96	

Full Name (Last, First, Middle Initial) C. David Cole		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 1213 Augusta Drive		Transaction ID: 110207-4
City Shelbyville	State KY	Zip Code 40065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	48.08
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 49
	<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 Inc. Political Action Committee (PPAC)

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

Mailing Address 1213 Augusta Drive

City State Zip Code
Shelbyville KY 40065

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

Name of Employer Occupation
Pharmerica Manager, General

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: 111607-4

Amount of Each Receipt this Period
25.00

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

Mailing Address 1213 Augusta Drive

City State Zip Code
Shelbyville KY 40065

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

Name of Employer Occupation
Pharmerica Manager, General

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: 113007-4

Amount of Each Receipt this Period
25.00

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

Mailing Address 419 Summer Sails Dr

City State Zip Code
Valrico FL 33594

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

Name of Employer Occupation
Pharmerica Director, Regional Reimbursement

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 484.56

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: 110207-31

Amount of Each Receipt this Period
20.19

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Patrick Daugherty		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 419 Summer Sails Dr		Transaction ID: 111607-28	
City State Zip Code Valrico FL 33594	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Director, Regional Reimbursement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56		

Full Name (Last, First, Middle Initial) B. Patrick Daugherty		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 419 Summer Sails Dr		Transaction ID: 113007-27	
City State Zip Code Valrico FL 33594	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Director, Regional Reimbursement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56		

Full Name (Last, First, Middle Initial) C. Todd Dipprey		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 1401 7th		Transaction ID: 110207-8	
City State Zip Code Shallowater TX 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 ▼ 484.56		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Todd Dipprey		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 1401 7th		Transaction ID: 111607-8
City State Zip Code Shallowater TX 79363	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.19
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 ▼ 484.56	

Full Name (Last, First, Middle Initial) B. Todd Dipprey		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 1401 7th		Transaction ID: 113007-8
City State Zip Code Shallowater TX 79363	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.19
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 ▼ 484.56	

Full Name (Last, First, Middle Initial) C. Juanita Dong		Date of Receipt MM / DD / YYYY 11 / 02 / 2007
Mailing Address 636 Berridge		Transaction ID: 110207-5
City State Zip Code Ridgeland MS 39157	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Pharmacist (Nx)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.99	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 49						
	(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

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

Full Name (Last, First, Middle Initial) A. Juanita Dong		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 636 Berridge		Transaction ID: 111607-5	
City State Zip Code Ridgeland MS 39157		Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Pharmerica Pharmacist (Nx)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 423.99	

Full Name (Last, First, Middle Initial) B. Juanita Dong		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 636 Berridge		Transaction ID: 113007-5	
City State Zip Code Ridgeland MS 39157		Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Pharmerica Pharmacist (Nx)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 423.99	

Full Name (Last, First, Middle Initial) C. Mary Douzjian		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 910 Santa Florencia		Transaction ID: 110207-40	
City State Zip Code Solana Beach CA 92075		Amount of Each Receipt this Period 11.54	
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 ▼ 276.96	

SUBTOTAL of Receipts This Page (optional) ▶	51.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Mary Douzjian		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 910 Santa Florencia		Transaction ID: 111607-37
City State Zip Code Solana Beach CA 92075	Amount of Each Receipt this Period 11.54	
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 ▼ 276.96	

Full Name (Last, First, Middle Initial) B. Mary Douzjian		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 910 Santa Florencia		Transaction ID: 113007-36
City State Zip Code Solana Beach CA 92075	Amount of Each Receipt this Period 11.54	
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 ▼ 276.96	

Full Name (Last, First, Middle Initial) C. Ronald Finch		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 12236 Juniper		Transaction ID: 110207-17
City State Zip Code Overland Park KS 66209	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 ▼ 484.56	

SUBTOTAL of Receipts This Page (optional) ▶	43.27
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Ronald Finch		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 12236 Juniper		Transaction ID: 111607-16	
City State Zip Code Overland Park KS 66209		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 ▼ 484.56	

Full Name (Last, First, Middle Initial) B. Ronald Finch		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 12236 Juniper		Transaction ID: 113007-15	
City State Zip Code Overland Park KS 66209		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 ▼ 484.56	

Full Name (Last, First, Middle Initial) C. Christopher Flori		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 10232 Douglas Oaks Cr., #303		Transaction ID: 110207-34	
City State Zip Code Tampa FL 33610		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation PharMerica Vice President, Product Development			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional) ▶	90.38
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
PharMerica Inc. Political Action Committee (PPAC)

A. Full Name (Last, First, Middle Initial) Christopher Flori		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 10232 Douglas Oaks Cr., #303		Transaction ID: 111607-31
City Tampa State FL Zip Code 33610	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
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 ▼ 700.00	

B. Full Name (Last, First, Middle Initial) Christopher Flori		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 2011 Frankfort Ave #209		Transaction ID: 113007-30
City Louisville State KY Zip Code 40206	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
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 ▼ 700.00	

C. Full Name (Last, First, Middle Initial) Linda Gelalia		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 9539 Norchester Cir		Transaction ID: 110207-48
City Tampa State FL Zip Code 33647	Amount of Each Receipt this Period 25.00	
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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	125.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Linda Gelalia		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 9539 Norchester Cir		Transaction ID: 111607-45	
City Tampa	State FL	Amount of Each Receipt this Period 25.00	
Zip Code 33647			
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 ▼ 600.00		

Full Name (Last, First, Middle Initial) B. Linda Gelalia		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 9539 Norchester Cir		Transaction ID: 113007-44	
City Tampa	State FL	Amount of Each Receipt this Period 25.00	
Zip Code 33647			
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 ▼ 600.00		

Full Name (Last, First, Middle Initial) C. Lee Gregoire		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 15350 Pompeii Square		Transaction ID: 110207-14	
City Colorado Springs	State CO	Amount of Each Receipt this Period 10.00	
Zip Code 80921			
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 ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	60.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Lee Gregoire		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 15350 Pompeii Square		Transaction ID: 111607-13
City State Zip Code Colorado Springs CO 80921	Amount of Each Receipt this Period 10.00	
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Lee Gregoire		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 15350 Pompeii Square		Transaction ID: 113007-12
City State Zip Code Colorado Springs CO 80921	Amount of Each Receipt this Period 10.00	
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Thomas Griffin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 10903 Ledgement Ln		Transaction ID: 110207-2
City State Zip Code Windermere FL 34786	Amount of Each Receipt this Period 25.00	
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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	45.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 49
	(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)
PharMerica Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Thomas Griffin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 10903 Ledgement Ln		Transaction ID: 111607-2
City State Zip Code Windermere FL 34786	Amount of Each Receipt this Period 25.00	
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Thomas Griffin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 10903 Ledgement Ln		Transaction ID: 113007-2
City State Zip Code Windermere FL 34786	Amount of Each Receipt this Period 25.00	
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Pamela Johnson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 4021 Audubon Drive		Transaction ID: 110207-47
City State Zip Code Largo FL 33771	Amount of Each Receipt this Period 25.00	
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 ▼ 600.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 49
	(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

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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Pamela Johnson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 4021 Audubon Drive		Transaction ID: 111607-44
City State Zip Code Largo FL 33771	Amount of Each Receipt this Period 25.00	
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Pamela Johnson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 4021 Audubon Drive		Transaction ID: 113007-43
City State Zip Code Largo FL 33771	Amount of Each Receipt this Period 25.00	
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Jeffrey Johnston		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 6 Pin Oak Court		Transaction ID: 110207-29
City State Zip Code West Port CT 06880	Amount of Each Receipt this Period 10.00	
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 ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	60.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Jeffrey Johnston		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 6 Pin Oak Court		Transaction ID: 111607-26	
City State Zip Code West Port CT 06880		Amount of Each Receipt this Period 10.00	
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Jeffrey Johnston		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 6 Pin Oak Court		Transaction ID: 113007-25	
City State Zip Code West Port CT 06880		Amount of Each Receipt this Period 10.00	
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) C. James Kilgus		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 130 Mason Road		Transaction ID: 110207-42	
City State Zip Code Brooklyn CT 06234		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 ▼ 484.56	

SUBTOTAL of Receipts This Page (optional) ▶	40.19
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. James Kilgus		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 130 Mason Road		Transaction ID: 111607-39
City State Zip Code Brooklyn CT 06234	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 ▼ 484.56	

Full Name (Last, First, Middle Initial) B. James Kilgus		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 130 Mason Road		Transaction ID: 113007-38
City State Zip Code Brooklyn CT 06234	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 ▼ 484.56	

Full Name (Last, First, Middle Initial) C. Mark Kirasich		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 7185 Crystal View Dr Se		Transaction ID: 110207-33
City State Zip Code Caleoonia MI 49316	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 ▼ 484.56	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Mark Kirasich		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 7185 Crystal View Dr Se		Transaction ID: 111607-30
City State Zip Code Caleoonia MI 49316	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 ▼ 484.56	

Full Name (Last, First, Middle Initial) B. Mark Kirasich		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 7185 Crystal View Dr Se		Transaction ID: 113007-29
City State Zip Code Caleoonia MI 49316	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 ▼ 484.56	

Full Name (Last, First, Middle Initial) C. Barbara Klinkel		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 2928 Falls		Transaction ID: 110207-15
City State Zip Code Rapid City SD 57702	Amount of Each Receipt this Period 25.00	
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 ▼ 600.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 49
	(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)
PharMerica Inc. Political Action Committee (PPAC)

A. Full Name (Last, First, Middle Initial)
Barbara Klinkel

Mailing Address 2928 Falls

City State Zip Code
Rapid City SD 57702

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

Name of Employer Occupation
Pharmerica Manager, General

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: 111607-14

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Barbara Klinkel

Mailing Address 2928 Falls

City State Zip Code
Rapid City SD 57702

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

Name of Employer Occupation
Pharmerica Manager, General

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: 113007-13

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Michael Koski

Mailing Address 1310 Jersey Ave N

City State Zip Code
Golden Valley MN 55427

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

Name of Employer Occupation
Pharmerica Pharmacy Ops Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: 110207-12

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional)	▶	71.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Michael Koski		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 1310 Jersey Ave N		Transaction ID: 111607-12	
City State Zip Code Golden Valley MN 55427	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
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 ▼ 504.00		

Full Name (Last, First, Middle Initial) B. Michael Koski		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 1310 Jersey Ave N		Transaction ID: 113007-11	
City State Zip Code Golden Valley MN 55427	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. C			
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 ▼ 504.00		

Full Name (Last, First, Middle Initial) C. Larry Litzmann		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 5617 Skimmer Dr		Transaction ID: 110207-6	
City State Zip Code Apollo Beach FL 33572	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
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 ▼ 2400.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Larry Litzmann		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 5617 Skimmer Dr		Transaction ID: 111607-6	
City State Zip Code Apollo Beach FL 33572	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
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 ▼ 2400.00		

Full Name (Last, First, Middle Initial) B. Larry Litzmann		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 5617 Skimmer Dr		Transaction ID: 113007-6	
City State Zip Code Apollo Beach FL 33572	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
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 ▼ 2400.00		

Full Name (Last, First, Middle Initial) C. Victor Manuele		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 1014 Northridge Rd		Transaction ID: 110207-39	
City State Zip Code Chaddsford PA 19317	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 ▼ 484.56		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Victor Manuele		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 1014 Northridge Rd		Transaction ID: 111607-36	
City State Zip Code Chaddsford PA 19317		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 ▼ 484.56	

Full Name (Last, First, Middle Initial) B. Victor Manuele		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 1014 Northridge Rd		Transaction ID: 113007-35	
City State Zip Code Chaddsford PA 19317		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 ▼ 484.56	

Full Name (Last, First, Middle Initial) C. Michael Martin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 4769 Greenview Ct		Transaction ID: 110207-35	
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 ▼ 484.56	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Michael Martin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 4769 Greenview Ct		Transaction ID: 111607-32	
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 Pharmerica	Occupation Manager, General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56		

Full Name (Last, First, Middle Initial) B. Michael Martin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 4769 Greenview Ct		Transaction ID: 113007-31	
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 Pharmerica	Occupation Manager, General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56		

Full Name (Last, First, Middle Initial) C. Patricia McSherry		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 840 Via Descanso		Transaction ID: 110207-26	
City State Zip Code El Paso TX 79912	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Director, Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional) ▶	50.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Natalie Moore		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 4207 W. Sevilla St.		Transaction ID: 110207-27	
City State Zip Code Tampa FL 33629		Amount of Each Receipt this Period 11.54	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation PharMerica Manager, Corporate Accounts			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 253.88	

Full Name (Last, First, Middle Initial) B. Christopher Novak		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 27 Tobisset St		Transaction ID: 110207-7	
City State Zip Code Mashpee MA 02649		Amount of Each Receipt this Period 11.54	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Pharmacia Consultant Pharmacist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 276.96	

Full Name (Last, First, Middle Initial) C. Christopher Novak		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 27 Tobisset St		Transaction ID: 111607-7	
City State Zip Code Mashpee MA 02649		Amount of Each Receipt this Period 11.54	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Pharmacia Consultant Pharmacist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 276.96	

SUBTOTAL of Receipts This Page (optional) ▶	34.62
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Christopher Novak		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 27 Tobisset St		Transaction ID: 113007-7	
City Mashpee	State MA	Zip Code 02649	Amount of Each Receipt this Period 11.54
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Consultant Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.96		

Full Name (Last, First, Middle Initial) B. Jay Palin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 10528 Chestnut Hill		Transaction ID: 110207-28	
City Fishers	State IN	Zip Code 46038	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Vice President, Ltc Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00		

Full Name (Last, First, Middle Initial) C. Jay Palin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 10528 Chestnut Hill		Transaction ID: 111607-25	
City Fishers	State IN	Zip Code 46038	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Vice President, Ltc Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00		

SUBTOTAL of Receipts This Page (optional) ▶	91.54
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 49						
	(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

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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Jay Palin		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 10528 Chestnut Hill		Transaction ID: 113007-24	
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 Pharmerica	Occupation Vice President, Ltc Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00		

Full Name (Last, First, Middle Initial) B. Yvonne Preziosi		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 1010 Oak Ridge Manor Dr		Transaction ID: 110207-50	
City State Zip Code Brandon FL 33511	Amount of Each Receipt this Period 11.54		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Manager, Paperless Implementation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.96		

Full Name (Last, First, Middle Initial) C. Yvonne Preziosi		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 1010 Oak Ridge Manor Dr		Transaction ID: 111607-47	
City State Zip Code Brandon FL 33511	Amount of Each Receipt this Period 11.54		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Manager, Paperless Implementation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.96		

SUBTOTAL of Receipts This Page (optional) ▶	63.08
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Yvonne Preziosi		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 1010 Oak Ridge Manor Dr		Transaction ID: 113007-46	
City State Zip Code Brandon FL 33511	Amount of Each Receipt this Period 11.54		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Manager, Paperless Implementation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.96		

Full Name (Last, First, Middle Initial) B. Larry Reis		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 6036 E. Illinois		Transaction ID: 110207-23	
City State Zip Code Fresno CA 93727	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Director, Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56		

Full Name (Last, First, Middle Initial) C. Larry Reis		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 6036 E. Illinois		Transaction ID: 111607-22	
City State Zip Code Fresno CA 93727	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Director, Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56		

SUBTOTAL of Receipts This Page (optional) ▶	51.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 49
	<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 Inc. Political Action Committee (PPAC)

A. Full Name (Last, First, Middle Initial) Larry Reis Mailing Address 6036 E. Illinois City State Zip Code Fresno CA 93727 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7 Transaction ID: 113007-21 Amount of Each Receipt this Period 20.19
Name of Employer Occupation PharMerica Director, Clinical Consulting Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 484.56		

B. Full Name (Last, First, Middle Initial) Timothy Rowland Mailing Address 5952 Jaegerglen Dr City State Zip Code Lithia FL 33547 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 7 Transaction ID: 110207-1 Amount of Each Receipt this Period 20.19
Name of Employer Occupation PharMerica Director, Operations Support Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 484.56		

C. Full Name (Last, First, Middle Initial) Timothy Rowland Mailing Address 5952 Jaegerglen Dr City State Zip Code Lithia FL 33547 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 7 Transaction ID: 111607-1 Amount of Each Receipt this Period 20.19
Name of Employer Occupation PharMerica Director, Operations Support Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 484.56		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Timothy Rowland		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 5952 Jaegerglen Dr		Transaction ID: 113007-1
City State Zip Code Lithia FL 33547	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation PharMerica Director, Operations Support		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56	

Full Name (Last, First, Middle Initial) B. David Rushing		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 2212 13th St. SW		Transaction ID: 110207-19
City State Zip Code Great Falls MT 59404	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 ▼ 484.56	

Full Name (Last, First, Middle Initial) C. David Rushing		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 2212 13th St. SW		Transaction ID: 111607-18
City State Zip Code Great Falls MT 59404	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 ▼ 484.56	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 49
	<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 Inc. Political Action Committee (PPAC)

A. Full Name (Last, First, Middle Initial) David Rushing		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 2212 13th St. SW		Transaction ID: 113007-17	
City State Zip Code Great Falls MT 59404	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 ▼ 484.56		

B. Full Name (Last, First, Middle Initial) Paula Ruskan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 13902 Blue Vista		Transaction ID: 110207-3	
City State Zip Code Sugar Land TX 77478	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 ▼ 484.56		

C. Full Name (Last, First, Middle Initial) Paula Ruskan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 13902 Blue Vista		Transaction ID: 111607-3	
City State Zip Code Sugar Land TX 77478	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 ▼ 484.56		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Paula Ruskan		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 13902 Blue Vista		Transaction ID: 113007-3	
City State Zip Code Sugar Land TX 77478		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 ▼ 484.56	

Full Name (Last, First, Middle Initial) B. Janice Rutkowski		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 1110 Abbeys Way		Transaction ID: 110207-11	
City State Zip Code Tampa FL 33602		Amount of Each Receipt this Period 76.92	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation PharMerica Svp, Clinical Services & Prog Dev			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1846.08	

Full Name (Last, First, Middle Initial) C. Janice Rutkowski		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 1110 Abbeys Way		Transaction ID: 111607-11	
City State Zip Code Tampa FL 33602		Amount of Each Receipt this Period 76.92	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation PharMerica Svp, Clinical Services & Prog Dev			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1846.08	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Janice Rutkowski		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 1110 Abbeys Way		Transaction ID: 113007-10	
City State Zip Code Tampa FL 33602	Amount of Each Receipt this Period 76.92		
FEC ID number of contributing federal political committee. C			
Name of Employer PharMerica	Occupation Svp, Clinical Services & Prog Dev		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1846.08		

Full Name (Last, First, Middle Initial) B. Kari Shanard-Koenders		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 3005 Spruceleigh Ct		Transaction ID: 110207-16	
City State Zip Code Sioux Falls SD 57105	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Utilization Management Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56		

Full Name (Last, First, Middle Initial) C. Kari Shanard-Koenders		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 3005 Spruceleigh Ct		Transaction ID: 111607-15	
City State Zip Code Sioux Falls SD 57105	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Utilization Management Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 49						
	(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

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

Full Name (Last, First, Middle Initial) A. Kari Shanard-Koenders		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 3005 Spruceleigh Ct		Transaction ID: 113007-14	
City State Zip Code Sioux Falls SD 57105	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer PharMerica	Occupation Utilization Management Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56		

Full Name (Last, First, Middle Initial) B. Elizabeth Shanks		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 1514 Newberger Rd		Transaction ID: 110207-49	
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 PharMerica	Occupation Regional Director, Account Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. Elizabeth Shanks		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 1514 Newberger Rd		Transaction ID: 111607-46	
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 PharMerica	Occupation Regional Director, Account Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Elizabeth Shanks		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 1514 Newberger Rd		Transaction ID: 113007-45
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 PharMerica	Occupation Regional Director, Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Wendy Stearns		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 3443 Sunbeam Drive		Transaction ID: 110207-46
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 Pharmerica	Occupation Director, Clinical Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56	

Full Name (Last, First, Middle Initial) C. Wendy Stearns		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 3443 Sunbeam Drive		Transaction ID: 111607-43
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 Pharmerica	Occupation Director, Clinical Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 49
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Wendy Stearns		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 3443 Sunbeam Drive		Transaction ID: 113007-42
City State Zip Code Sarasota FL 34240	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Director, Clinical Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.56	

Full Name (Last, First, Middle Initial) B. Alfred Vasquez		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 10548 Madison Brooks Dr		Transaction ID: 110207-37
City State Zip Code Fortville IN 46040	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00
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 ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Alfred Vasquez		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 10548 Madison Brooks Dr		Transaction ID: 111607-34
City State Zip Code Fortville IN 46040	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00
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 ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	▶	50.19
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 49		
	<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

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

Full Name (Last, First, Middle Initial) A. Alfred Vasquez		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
Mailing Address 10548 Madison Brooks Dr		Transaction ID: 113007-33
City Fortville	State IN	Zip Code 46040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
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 ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Daniel Weiss		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 1605 S Dakota Ave		Transaction ID: 110207-44
City Sioux Falls	State SD	Zip Code 57105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 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 ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Daniel Weiss		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address 1605 S Dakota Ave		Transaction ID: 111607-41
City Sioux Falls	State SD	Zip Code 57105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	65.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
PharMerica Inc. Political Action Committee (PPAC)

A. Full Name (Last, First, Middle Initial)
Daniel Weiss

Mailing Address 1605 S Dakota Ave

City State Zip Code
Sioux Falls SD 57105

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

Name of Employer Occupation
PharMerica Manager, General

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: 113007-40

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Sheri Zapp

Mailing Address 1663 E Montoya Ln

City State Zip Code
Phoenix AZ 85024

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

Name of Employer Occupation
PharMerica Executive Director, Med D Contracting

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: 110207-32

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Sheri Zapp

Mailing Address 1663 E Montoya Ln

City State Zip Code
Phoenix AZ 85024

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

Name of Employer Occupation
PharMerica Executive Director, Med D Contracting

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: 111607-29

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)	▶	65.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 49		
	<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

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

Full Name (Last, First, Middle Initial) A. Sheri Zapp		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7	
Mailing Address 1663 E Montoya Ln		Transaction ID: 113007-28	
City State Zip Code Phoenix AZ 85024	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer PharMerica	Occupation Executive Director, Med D Contracting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) B. Cheryl Zinn		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7	
Mailing Address 4008 September Song		Transaction ID: 110207-18	
City State Zip Code Manchaca TX 78652	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 ▼ 484.56		

Full Name (Last, First, Middle Initial) C. Cheryl Zinn		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
Mailing Address 4008 September Song		Transaction ID: 111607-17	
City State Zip Code Manchaca TX 78652	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 ▼ 484.56		

SUBTOTAL of Receipts This Page (optional) ▶	60.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 48 / 49	
	(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)
PharMerica Inc. Political Action Committee (PPAC)

A. 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 ▼
484.56

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: 113007-16

Amount of Each Receipt this Period
20.19

SUBTOTAL of Receipts This Page (optional)	▶	20.19
TOTAL This Period (last page this line number only)	▶	3069.42

**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 49 / 49

<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)
PharMerica Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Grassley Committee Inc		Transaction ID: 41095-1530877947807 Date of Disbursement 11 / 29 / 2007
Mailing Address PO Box 1000		Amount of Each Disbursement this Period 1000.00
City Des Moines State IA Zip Code 50304	011 Category/ Type	
Purpose of Disbursement 2008 Primary Candidate Name Charles Grassley		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Pat Roberts for Senate		Transaction ID: 41095-6417810320854 Date of Disbursement 11 / 29 / 2007
Mailing Address PO Box 433		Amount of Each Disbursement this Period 1000.00
City Great Bend State KS Zip Code 67530	011 Category/ Type	
Purpose of Disbursement 2008 Primary Candidate Name Pat Roberts		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District:	Disbursement For: 2008 <input checked="" 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) ►

2000.00