

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
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 09 01 2010 through 09 30 2010

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 A. Hartlage

Signature of Treasurer Electronically Filed by Teri A. Hartlage Date 10 14 2010

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

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

A. Form/Schedule : **F3X**

Transaction ID :

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		139722.03
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	157886.44									
(c) Total Receipts (from Line 19) .....	3300.62	29965.03								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	161187.06	169687.06								
7. Total Disbursements (from Line 31) .....	15500.00	24000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	145687.06	145687.06								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	3104.70	21787.66
(ii) Unitemized .....	195.92	8177.37
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	3300.62	29965.03
(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) .....	3300.62	29965.03
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)) .....	3300.62	29965.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3300.62	29965.03

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	15500.00	24000.00
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))..	15500.00	24000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15500.00	24000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	3300.62	29965.03
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3300.62	29965.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 33
	<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	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Andrews		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 10 / 2010
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 091010-12
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 403.80	<input type="text"/> 20.19

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Andrews		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 24 / 2010
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 092410-12
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 403.80	<input type="text"/> 20.19

<b>C.</b>	Full Name (Last, First, Middle Initial) Charles Ashy		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 10 / 2010
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 091010-33
Name of Employer Pharmerica		Occupation Director, Process Improvement	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 328.70	<input type="text"/> 17.30

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 57.68
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles Ashy	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 092410-33
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 17.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Director, Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.70	

<b>B.</b>	Full Name (Last, First, Middle Initial) Tracy Atkinson	Date of Receipt MM / DD / YYYY 09 / 10 / 2010
	Mailing Address 2720-A Broadbent Parkway	<b>Transaction ID:</b> 091010-21
	City State Zip Code Albuquerque NM 87107	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 ▼ 475.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Tracy Atkinson	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
	Mailing Address 2720-A Broadbent Parkway	<b>Transaction ID:</b> 092410-21
	City State Zip Code Albuquerque NM 87107	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 ▼ 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	67.30
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) John Baughman</p> <p>Mailing Address 1901 Campus Place</p> <p>City State Zip Code Louisville KY 40299</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Lead Consultant</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">475.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 03 / 2010</p> <p><b>Transaction ID:</b> 090310-8</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) John Baughman</p> <p>Mailing Address 1901 Campus Place</p> <p>City State Zip Code Louisville KY 40299</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Lead Consultant</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">475.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 17 / 2010</p> <p><b>Transaction ID:</b> 091710-8</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Thomas Caneris</p> <p>Mailing Address 1901 Campus Place</p> <p>City State Zip Code Louisville KY 40299</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica SVP General Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2192.22</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 10 / 2010</p> <p><b>Transaction ID:</b> 091010-30</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">115.38</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">165.38</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 10 / 33

(check only one)

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

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

**A.**

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

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica SVP General Counsel

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2192.22

Date of Receipt

M M / D D / Y Y Y Y  
09 / 24 / 2010

Transaction ID: 092410-30

Amount of Each Receipt this Period

115.38

**B.**

Full Name (Last, First, Middle Initial)  
Stephen Coffey

Mailing Address 83 Vermont Ave. Unit 2

City State Zip Code  
Warwick RI 02888

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

Name of Employer Occupation  
Pharmerica General Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 328.70

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2010

Transaction ID: 091010-4

Amount of Each Receipt this Period

17.30

**C.**

Full Name (Last, First, Middle Initial)  
Stephen Coffey

Mailing Address 83 Vermont Ave. Unit 2

City State Zip Code  
Warwick RI 02888

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

Name of Employer Occupation  
Pharmerica General Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 328.70

Date of Receipt

M M / D D / Y Y Y Y  
09 / 24 / 2010

Transaction ID: 092410-4

Amount of Each Receipt this Period

17.30

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

149.98

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 33
	<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 Corporation Political Action Committee PPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Todd Dipprey		Date of Receipt MM / DD / YYYY 09 / 10 / 2010		
	Mailing Address 6113 43rd St Suite D		<b>Transaction ID:</b> 091010-15		
	City Lubbock	State TX	Zip Code 79407	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. <b>C</b>		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Pharmerica		Occupation Manager, General		Aggregate Year-to-Date ▼ 383.61	

<b>B.</b>	Full Name (Last, First, Middle Initial) Todd Dipprey		Date of Receipt MM / DD / YYYY 09 / 24 / 2010		
	Mailing Address 6113 43rd St Suite D		<b>Transaction ID:</b> 092410-15		
	City Lubbock	State TX	Zip Code 79407	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. <b>C</b>		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Pharmerica		Occupation Manager, General		Aggregate Year-to-Date ▼ 383.61	

<b>C.</b>	Full Name (Last, First, Middle Initial) Leo F Doherty		Date of Receipt MM / DD / YYYY 09 / 10 / 2010		
	Mailing Address 1515 Commonwealth Avenue		<b>Transaction ID:</b> 091010-3		
	City Boston	State MA	Zip Code 02135	Amount of Each Receipt this Period 17.30	
	FEC ID number of contributing federal political committee. <b>C</b>		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Boston - KPHS		Occupation Dir Pharmacy-E (Hospital)		Aggregate Year-to-Date ▼ 311.40	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	57.68
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 33  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Leo F Doherty

Mailing Address 1515 Commonwealth Avenue

City State Zip Code  
Boston MA 02135

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

Name of Employer Occupation  
Boston - KPHS Dir Pharmacy-E (Hospital)

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 311.40

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

**Transaction ID:** 092410-3

Amount of Each Receipt this Period  
17.30

**B.**

Full Name (Last, First, Middle Initial)  
Mary Douzjian

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Lead Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 219.26

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2010

**Transaction ID:** 090310-2

Amount of Each Receipt this Period  
11.54

**C.**

Full Name (Last, First, Middle Initial)  
Mary Douzjian

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Lead Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 219.26

Date of Receipt  
MM / DD / YYYY  
09 / 17 / 2010

**Transaction ID:** 091710-2

Amount of Each Receipt this Period  
11.54

**SUBTOTAL** of Receipts This Page (optional) ..... ► **40.38**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Griffin	Date of Receipt MM / DD / YYYY 09 / 10 / 2010
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 091010-13
	City State Zip Code Louisville KY 40299	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 ▼ 475.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas Griffin	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 092410-13
	City State Zip Code Louisville KY 40299	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 ▼ 475.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Teri Hartlage	Date of Receipt MM / DD / YYYY 09 / 10 / 2010
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 091010-1
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 30.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 584.63	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.77
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 33  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Teri Hartlage

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica VP Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
584.63

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

**Transaction ID:** 092410-1

Amount of Each Receipt this Period  
30.77

**B.**

Full Name (Last, First, Middle Initial)  
Anthony Hernandez

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica SVP Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2192.22

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

**Transaction ID:** 091010-26

Amount of Each Receipt this Period  
115.38

**C.**

Full Name (Last, First, Middle Initial)  
Anthony Hernandez

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica SVP Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2192.22

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

**Transaction ID:** 092410-26

Amount of Each Receipt this Period  
115.38

**SUBTOTAL** of Receipts This Page (optional) ..... ► **261.53**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 33  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Nancy M Hoffman

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer REGIONAL OH Occupation VP LTC Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 527.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: 091010-20

Amount of Each Receipt this Period  
31.00

**B.**

Full Name (Last, First, Middle Initial)  
Nancy M Hoffman

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer REGIONAL OH Occupation VP LTC Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 527.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

Transaction ID: 092410-20

Amount of Each Receipt this Period  
31.00

**C.**

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

Mailing Address 2200 Tall Pines Dr Suite 118

City State Zip Code  
Largo FL 33771

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

Transaction ID: 091010-8

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **87.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 33  
(check only one)

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

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

**A.**

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

Mailing Address 2200 Tall Pines Dr Suite 118

City State Zip Code  
Largo FL 33771

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

**Transaction ID:** 092410-8

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Timothy W. Jolly

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
BUSINESS DEVELOPMENT VP Acquisitions

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

**Transaction ID:** 091010-2

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Timothy W. Jolly

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
BUSINESS DEVELOPMENT VP Acquisitions

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

**Transaction ID:** 092410-2

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **85.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) John Kernaghan	Date of Receipt MM / DD / YYYY 09 / 10 / 2010
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 091010-36
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 115.39
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pharmerica	Occupation SVP Chief Information Of	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2192.41	

<b>B.</b>	Full Name (Last, First, Middle Initial) John Kernaghan	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 092410-36
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 115.39
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pharmerica	Occupation SVP Chief Information Of	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2192.41	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Koski	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
	Mailing Address 5255 East River Road Suite 204	<b>Transaction ID:</b> 090310-7
	City State Zip Code Fridley MN 55421	Amount of Each Receipt this Period 21.00
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 399.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>251.78</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 33  
(check only one)

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

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

**A.**

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

Mailing Address 5255 East River Road Suite 204

City State Zip Code  
Fridley MN 55421

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

Name of Employer Occupation  
Pharmerica Pharmacy Ops Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 17 / 2010

**Transaction ID:** 091710-7

Amount of Each Receipt this Period  
21.00

**B.**

Full Name (Last, First, Middle Initial)  
William Lademann

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Hospital Pharm Services (OH) SVP Hospital Pharmacy Se

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1624.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 10 / 2010

**Transaction ID:** 091010-24

Amount of Each Receipt this Period  
116.00

**C.**

Full Name (Last, First, Middle Initial)  
William Lademann

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Hospital Pharm Services (OH) SVP Hospital Pharmacy Se

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1624.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 24 / 2010

**Transaction ID:** 092410-24

Amount of Each Receipt this Period  
116.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **253.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 33						
	(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 Corporation Political Action Committee PPAC

**A.**

Full Name (Last, First, Middle Initial)  
James Loftin

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer REGIONAL OH Occupation VP LTC Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 523.09

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 10 / 2010

**Transaction ID:** 091010-14

Amount of Each Receipt this Period  
30.77

**B.**

Full Name (Last, First, Middle Initial)  
James Loftin

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer REGIONAL OH Occupation VP LTC Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 523.09

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 24 / 2010

**Transaction ID:** 092410-14

Amount of Each Receipt this Period  
30.77

**C.**

Full Name (Last, First, Middle Initial)  
Mark Marshall

Mailing Address 230 Westway Place Ste 105

City State Zip Code  
Arlington TX 76018

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

Name of Employer Pharmerica Occupation VP Client Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 653.82

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 10 / 2010

**Transaction ID:** 091010-38

Amount of Each Receipt this Period  
38.46

**SUBTOTAL** of Receipts This Page (optional) ..... ► **100.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 33  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Mark Marshall

Mailing Address 230 Westway Place Ste 105

City State Zip Code  
Arlington TX 76018

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

Name of Employer Occupation  
Pharmerica VP Client Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 653.82

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 24 / 2010

**Transaction ID:** 092410-38

Amount of Each Receipt this Period  
38.46

**B.** Full Name (Last, First, Middle Initial)  
Robert McKay

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica SVP Sales & Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2192.22

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 10 / 2010

**Transaction ID:** 091010-28

Amount of Each Receipt this Period  
115.38

**C.** Full Name (Last, First, Middle Initial)  
Robert McKay

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica SVP Sales & Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2192.22

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 24 / 2010

**Transaction ID:** 092410-28

Amount of Each Receipt this Period  
115.38

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **269.22**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) William Monast		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 091010-40
Name of Employer Pharmerica Executives		Occupation EVP Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 3653.70	<input type="text"/> 192.30

<b>B.</b>	Full Name (Last, First, Middle Initial) William Monast		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 092410-40
Name of Employer Pharmerica Executives		Occupation EVP Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 3653.70	<input type="text"/> 192.30

<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher Moss		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 091010-32
Name of Employer Pharmerica		Occupation Dir Benefits	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 328.70	<input type="text"/> 17.30

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 401.90
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 33  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Christopher Moss

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Dir Benefits

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 328.70

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

**Transaction ID:** 092410-32

Amount of Each Receipt this Period  
17.30

**B.**

Full Name (Last, First, Middle Initial)  
Robert Nolan

Mailing Address 3802 Corporex Park Dr. Ste 200

City State Zip Code  
Tampa FL 33619

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

Name of Employer Occupation  
Pharmerica VP Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 584.63

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

**Transaction ID:** 091010-39

Amount of Each Receipt this Period  
30.77

**C.**

Full Name (Last, First, Middle Initial)  
Robert Nolan

Mailing Address 3802 Corporex Park Dr. Ste 200

City State Zip Code  
Tampa FL 33619

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

Name of Employer Occupation  
Pharmerica VP Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 584.63

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

**Transaction ID:** 092410-39

Amount of Each Receipt this Period  
30.77

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **78.84**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 33  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial) Christopher Novak		Date of Receipt MM / DD / YYYY 09 / 03 / 2010
Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 090310-1
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 11.54
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 ▼ 219.26	

**B.**

Full Name (Last, First, Middle Initial) Christopher Novak		Date of Receipt MM / DD / YYYY 09 / 17 / 2010
Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 091710-1
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 11.54
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 ▼ 219.26	

**C.**

Full Name (Last, First, Middle Initial) Michelle P Orkline		Date of Receipt MM / DD / YYYY 09 / 10 / 2010
Mailing Address 5100 Campus Dr		<b>Transaction ID:</b> 091010-6
City Plymouth Meeting	State PA	Zip Code 19462
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 17.30
Name of Employer PharMerica (Plymouth Mtg.)	Occupation Dir Pharmacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.20	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>40.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 33

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Michelle P Orkline

Mailing Address 5100 Campus Dr

City State Zip Code  
Plymouth Meeting PA 19462

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

Name of Employer Occupation  
PharMerica (Plymouth Mtg.) Dir Pharmacy

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 242.20

Date of Receipt

M M / D D / Y Y Y Y  
09 / 24 / 2010

Transaction ID: 092410-6

Amount of Each Receipt this Period  
17.30

**B.**

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

Mailing Address 1901 Campus Place

City State Zip Code  
LOUISVILLE KY 40299

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

Name of Employer Occupation  
Pharmerica Vice President, Ltc Operations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 760.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2010

Transaction ID: 091010-16

Amount of Each Receipt this Period  
40.00

**C.**

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

Mailing Address 1901 Campus Place

City State Zip Code  
LOUISVILLE KY 40299

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

Name of Employer Occupation  
Pharmerica Vice President, Ltc Operations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 760.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 24 / 2010

Transaction ID: 092410-16

Amount of Each Receipt this Period  
40.00

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

97.30

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 33

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Brian Pate

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Dir Financial Reporting

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 328.70

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2010

Transaction ID: 091010-27

Amount of Each Receipt this Period

17.30

**B.**

Full Name (Last, First, Middle Initial)  
Brian Pate

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Dir Financial Reporting

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 328.70

Date of Receipt

M M / D D / Y Y Y Y  
09 / 24 / 2010

Transaction ID: 092410-27

Amount of Each Receipt this Period

17.30

**C.**

Full Name (Last, First, Middle Initial)  
Kirk M. Pompeo

Mailing Address 3802 Corporex Park Dr. Ste 200

City State Zip Code  
Tampa FL 33619

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

Name of Employer Occupation  
Ltc Sales & Mktg Vp VP LTC Sales

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 523.09

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2010

Transaction ID: 091010-41

Amount of Each Receipt this Period

30.77

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

65.37

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 33

(check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kirk M. Pompeo		Date of Receipt MM / DD / YYYY 09 / 24 / 2010		
	Mailing Address 3802 Corporex Park Dr. Ste 200		<b>Transaction ID:</b> 092410-41		
	City Tampa	State FL	Zip Code 33619	Amount of Each Receipt this Period 30.77	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Ltc Sales & Mktg Vp	Occupation VP LTC Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 523.09			

<b>B.</b>	Full Name (Last, First, Middle Initial) Kari Shanard-Koenders		Date of Receipt MM / DD / YYYY 09 / 10 / 2010		
	Mailing Address 1900 Campus Place		<b>Transaction ID:</b> 091010-17		
	City LOUISVILLE	State KY	Zip Code 40299	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 ▼ 383.61			

<b>C.</b>	Full Name (Last, First, Middle Initial) Kari Shanard-Koenders		Date of Receipt MM / DD / YYYY 09 / 24 / 2010		
	Mailing Address 1900 Campus Place		<b>Transaction ID:</b> 092410-17		
	City LOUISVILLE	State KY	Zip Code 40299	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 ▼ 383.61			

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

71.15

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 33		
	<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 Corporation Political Action Committee PPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks		Date of Receipt
	Mailing Address 230 Westway Place Ste 105		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 10 / 2010
	City	State	Zip Code
	Arlington	TX	76018
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 091010-9
Name of Employer PharMerica		Occupation Regional Director, Account Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	<input type="text"/> 25.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks		Date of Receipt
	Mailing Address 230 Westway Place Ste 105		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 24 / 2010
	City	State	Zip Code
	Arlington	TX	76018
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 092410-9
Name of Employer PharMerica		Occupation Regional Director, Account Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	<input type="text"/> 25.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Frank J Smitherman		Date of Receipt
	Mailing Address 3802 Corporex Park Dr. Ste 200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 10 / 2010
	City	State	Zip Code
	Tampa	FL	33619
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 091010-10
Name of Employer Inventory Management		Occupation VP Inventory Mgmt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 653.82	<input type="text"/> 38.46

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 88.46
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 33

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Frank J Smitherman

Mailing Address 3802 Corporex Park Dr. Ste 200

City State Zip Code  
Tampa FL 33619

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

Name of Employer Occupation  
Inventory Management VP Inventory Mgmt

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 653.82

Date of Receipt

M M / D D / Y Y Y Y  
09 / 24 / 2010

Transaction ID: 092410-10

Amount of Each Receipt this Period

38.46

**B.**

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

Mailing Address 3802 Corporex Park Dr. Ste 200

City State Zip Code  
Tampa FL 33619

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

Name of Employer Occupation  
Pharmerica Director, Clinical Consulting

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 343.23

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2010

Transaction ID: 091010-7

Amount of Each Receipt this Period

20.19

**C.**

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

Mailing Address 3802 Corporex Park Dr. Ste 200

City State Zip Code  
Tampa FL 33619

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

Name of Employer Occupation  
Pharmerica Director, Clinical Consulting

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 343.23

Date of Receipt

M M / D D / Y Y Y Y  
09 / 24 / 2010

Transaction ID: 092410-7

Amount of Each Receipt this Period

20.19

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

78.84

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 33  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Berard Tomassetti

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica SVP Chief Accounting Off

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1038.42

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

**Transaction ID:** 091010-23

Amount of Each Receipt this Period  
57.69

**B.**

Full Name (Last, First, Middle Initial)  
Berard Tomassetti

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica SVP Chief Accounting Off

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1038.42

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

**Transaction ID:** 092410-23

Amount of Each Receipt this Period  
57.69

**C.**

Full Name (Last, First, Middle Initial)  
Stephen Welch

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Dir Tax Compl

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.37

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

**Transaction ID:** 091010-29

Amount of Each Receipt this Period  
19.23

**SUBTOTAL** of Receipts This Page (optional) ..... ► **134.61**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Welch	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 092410-29
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica Dir Tax Compl	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.37	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Wise	Date of Receipt MM / DD / YYYY 09 / 10 / 2010
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 091010-37
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 30.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation KPS Overhead VP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 523.09	

<b>C.</b>	Full Name (Last, First, Middle Initial) James Wise	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 092410-37
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 30.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation KPS Overhead VP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 523.09	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	80.77
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 33
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Cheryl Zinn		Date of Receipt
	Mailing Address 321 W. Ben White Blvd Ste 103		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 10 / 2010
	City	State	Zip Code
	Austin	TX	78704
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 091010-18
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 383.61	<input type="text"/> 20.19

<b>B.</b>	Full Name (Last, First, Middle Initial) Cheryl Zinn		Date of Receipt
	Mailing Address 321 W. Ben White Blvd Ste 103		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 24 / 2010
	City	State	Zip Code
	Austin	TX	78704
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 092410-18
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 383.61	<input type="text"/> 20.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 40.38
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 3104.70

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) America's Leadership Pac	Transaction ID: 250313B310B3C021BCB
	Mailing Address 607 14th Street, NW, Suite 800	Date of Disbursement 09 / 24 / 2010
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement 2010 Contribution	011 Category/ Type
	Candidate Name America's Leadership Pac	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Friends of Congressman Tim Holden	Transaction ID: ACB948FEC39DCB458B5
	Mailing Address 18 North Second Street, Box 37	Date of Disbursement 09 / 20 / 2010
	City Saint Clair State PA Zip Code 17970	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement 2010 General	011 Category/ Type
	Candidate Name Tim Holden	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: PA District: 17	

C.	Full Name (Last, First, Middle Initial) Kenny Marchant for Congress	Transaction ID: 639E4CF680C4CA48763
	Mailing Address PO Box 110187	Date of Disbursement 09 / 24 / 2010
	City Carrollton State TX Zip Code 75011	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement 2010 General	011 Category/ Type
	Candidate Name Kenny Marchant	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: TX District: 24	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 33

<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 Corporation Political Action Committee PPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Langevin for Congress Mailing Address 181A Knight Street City Warwick State RI Zip Code 02886 Purpose of Disbursement 2010 General Candidate Name James R. Langevin Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CF60A90E38CB4429F43 Date of Disbursement 09 / 24 / 2010
	Amount of Each Disbursement this Period 2000.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) McConnell Senate Committee '14 Mailing Address PO Box 1496 City Louisville State KY Zip Code 40201 Purpose of Disbursement 2014 Primary Candidate Name Mitch McConnell Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BFBB9D529503F34EA70 Date of Disbursement 09 / 20 / 2010
	Amount of Each Disbursement this Period 4000.00 Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Todd Lally Mailing Address 2017 Boulevard Napoleon City Louisville State KY Zip Code 40205 Purpose of Disbursement 2010 General Candidate Name Todd Lally Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D83FD692F6227A309BB Date of Disbursement 09 / 28 / 2010
	Amount of Each Disbursement this Period 2500.00 Category/Type 011

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

8500.00

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

15500.00