

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) 3625 Queen Palm Drive
 Check if different than previously reported. (ACC)
Tampa FL 33619

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 01 01 2006 through 02 28 2006

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 John M. Lanier

Signature of Treasurer Electronically Filed by John M. Lanier Date 03 16 2006

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
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		43850.13
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	43850.13									
(c) Total Receipts (from Line 19)	13290.36	13290.36								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	57140.49	57140.49								
7. Total Disbursements (from Line 31)	0.06	0.06								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57140.43	57140.43								
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
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

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	1392.29	1392.29
(i) Itemized (use Schedule A)	6898.07	6898.07
(ii) Unitemized	8290.36	8290.36
(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)	8290.36	8290.36
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	5000.00	5000.00
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))	13290.36	13290.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13290.36	13290.36

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	0.06	0.06
(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))	0.06	0.06
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.06	0.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	0.06	0.06

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)	8290.36	8290.36
34. Total Contribution Refunds (from Line 28(d))	0.06	0.06
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8290.30	8290.30
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 / 12
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) A. Scott Arledge		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 6026 Osprey Lake Circle		Transaction ID: 031606-6
City State Zip Code Riverview FL 33569-3958	Amount of Each Receipt this Period 76.92	
FEC ID number of contributing federal political committee. C		
Name of Employer PharMerica	Occupation SVP; Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

Full Name (Last, First, Middle Initial) B. Scott Arledge		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 6026 Osprey Lake Circle		Transaction ID: 031606-91
City State Zip Code Riverview FL 33569-3958	Amount of Each Receipt this Period 76.92	
FEC ID number of contributing federal political committee. C		
Name of Employer PharMerica	Occupation SVP; Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

Full Name (Last, First, Middle Initial) C. Lois Grubb		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 909 Hemingway Circle		Transaction ID: 031606-31
City State Zip Code Tampa FL 33602-5980	Amount of Each Receipt this Period 76.92	
FEC ID number of contributing federal political committee. C		
Name of Employer PharMerica	Occupation SVP; Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

SUBTOTAL of Receipts This Page (optional) ▶	230.76
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 / 12
	<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. Lois Grubb		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 909 Hemingway Circle		Transaction ID: 031606-116	
City State Zip Code Tampa FL 33602-5980	Amount of Each Receipt this Period 76.92		
FEC ID number of contributing federal political committee. C			
Name of Employer PharMerica	Occupation SVP; Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68		

Full Name (Last, First, Middle Initial) B. Larry A Litzmann		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 5617 Skimmer Drive		Transaction ID: 031606-48	
City State Zip Code Apollo Beach FL 33572-3353	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer PharMerica	Occupation SVP; Marketing & Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Larry A Litzmann		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 5617 Skimmer Drive		Transaction ID: 031606-133	
City State Zip Code Apollo Beach FL 33572-3353	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer PharMerica	Occupation SVP; Marketing & Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	276.92
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 8 / 12
	<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"/>	<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 S Rosenblum		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 21 Dunwoodie Road		Transaction ID: 031606-66	
City State Zip Code Glenmont NY 12077-2903	Amount of Each Receipt this Period 76.92		
FEC ID number of contributing federal political committee. C			
Name of Employer PharMerica	Occupation SVP; Strategic Planning Devel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68		

Full Name (Last, First, Middle Initial) B. Michael S Rosenblum		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 21 Dunwoodie Road		Transaction ID: 031606-151	
City State Zip Code Glenmont NY 12077-2903	Amount of Each Receipt this Period 76.92		
FEC ID number of contributing federal political committee. C			
Name of Employer PharMerica	Occupation SVP; Strategic Planning Devel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68		

Full Name (Last, First, Middle Initial) C. Janice Rutkowski		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 1110 Abbeys Way		Transaction ID: 031606-71	
City State Zip Code Tampa FL 33602-5957	Amount of Each Receipt this Period 76.92		
FEC ID number of contributing federal political committee. C			
Name of Employer PharMerica	Occupation SVP; Clinical Svcs & Prog Dev		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68		

SUBTOTAL of Receipts This Page (optional) ▶	230.76
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 / 12
	<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. Janice Rutkowski		Date of Receipt MM / DD / YYYY 02 / 24 / 2006
Mailing Address 1110 Abbeys Way		Transaction ID: 031606-156
City Tampa	State FL	Zip Code 33602-5957
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer PharMerica	Occupation SVP; Clinical Svcs & Prog Dev	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

Full Name (Last, First, Middle Initial) B. William G Shields		Date of Receipt MM / DD / YYYY 01 / 27 / 2006
Mailing Address 918 Hemingway Circle		Transaction ID: 021506-76
City Tampa	State FL	Zip Code 33602-5980
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.31
Name of Employer PharMerica	Occupation President; Long Term Care	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.24	

Full Name (Last, First, Middle Initial) C. William G Shields		Date of Receipt MM / DD / YYYY 02 / 10 / 2006
Mailing Address 918 Hemingway Circle		Transaction ID: 031606-76
City Tampa	State FL	Zip Code 33602-5980
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.31
Name of Employer PharMerica	Occupation President; Long Term Care	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.24	

SUBTOTAL of Receipts This Page (optional)	461.54
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 10 / 12	
	(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)
William G Shields

Mailing Address 918 Hemingway Circle

City Tampa State FL Zip Code 33602-5980

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

Name of Employer PharMerica Occupation President; Long Term Care

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
769.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	4	/	2	0	0	6

Transaction ID: 031606-161

Amount of Each Receipt this Period
192.31

SUBTOTAL of Receipts This Page (optional)	▶	192.31
TOTAL This Period (last page this line number only)	▶	1392.29

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

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

Mailing Address PO Box 746

City State Zip Code
Bakersfield CA 93302

FEC ID number of contributing federal political committee. **C** C00117721

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
02 / 15 / 2006

Transaction ID: 8755100602154656754

Amount of Each Receipt this Period
2500.00

Refund of 7/15/05 Contribution

B. Full Name (Last, First, Middle Initial)
Hatch Election Committee Inc

Mailing Address 175 South West Temple Suite 650

City State Zip Code
Salt Lake City UT 84101

FEC ID number of contributing federal political committee. **C** C00104752

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
02 / 15 / 2006

Transaction ID: 6250350602154682143

Amount of Each Receipt this Period
2500.00

Refund of 9/6/2005 Contribution

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	5000.00

**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 12 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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. William G Shields		Transaction ID: 9185100601186670087																					
Mailing Address 918 Hemingway Circle		Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	1	/	1	2	/	2	0	0	6														
City Tampa	State FL	Zip Code 33602-5980																					
Purpose of Disbursement Contribution Refund		Amount of Each Disbursement this Period <table border="1"> <tr> <td>0.06</td> </tr> </table>		0.06																			
0.06																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:		Category/ Type																					

SUBTOTAL of Disbursements This Page (optional)	▶	0.06
TOTAL This Period (last page this line number only)	▶	0.06