

# 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 06 01 2006 through 06 30 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 07 17 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	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

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 .....	63439.81									
(c) Total Receipts (from Line 19) .....	6060.65	31650.39								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	69500.46	75500.52								
7. Total Disbursements (from Line 31) .....	8500.00	14500.06								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	61000.46	61000.46								
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 Inc. Political Action Committee (PPAC)

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

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	5374.31	13118.20
(i) Itemized (use Schedule A) .....	686.34	13532.19
(ii) Unitemized .....	6060.65	26650.39
(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) .....	6060.65	26650.39
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	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)) .....	6060.65	31650.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6060.65	31650.39

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<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.....	8500.00	14500.00
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	0.06
(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)) .....	0.00	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))..	8500.00	14500.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	8500.00	14500.06

**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) .....	6060.65	26650.39
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.06
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6060.65	26650.33
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 / 61
	<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) <b>A.</b> Harris-Spears Amy		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2006	
Mailing Address 241 Elmcrest Dr		<b>Transaction ID:</b> 062006-31	
City State Zip Code Holly Springs NC 27540-7402	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Dir; Strategic Planning		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Harris-Spears Amy		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2006	
Mailing Address 241 Elmcrest Dr		<b>Transaction ID:</b> 060706-31	
City State Zip Code Holly Springs NC 27540-7402	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Dir; Strategic Planning		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Harris-Spears Amy		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 241 Elmcrest Dr		<b>Transaction ID:</b> 070606-31	
City State Zip Code Holly Springs NC 27540-7402	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Dir; Strategic Planning		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	35.00
<b>TOTAL</b> 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 / 61
	<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) <b>A. Michael Andrews</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 24712 231st Ave SE		<b>Transaction ID: 062006-4</b>	
City State Zip Code Maple Valley WA 98038-6881	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>B. Michael Andrews</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 24712 231st Ave SE		<b>Transaction ID: 060706-4</b>	
City State Zip Code Maple Valley WA 98038-6881	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>C. Michael Andrews</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 24712 231st Ave SE		<b>Transaction ID: 070606-4</b>	
City State Zip Code Maple Valley WA 98038-6881	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> 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 / 61
	<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) <b>A.</b> Astore Anthony		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 7 Hempstead Rd		<b>Transaction ID:</b> 062006-7
City	State	Zip Code
Trenton	NJ	08610-2412
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Pharmerica	Occupation Consultant Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Astore Anthony		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 7 Hempstead Rd		<b>Transaction ID:</b> 060706-7
City	State	Zip Code
Trenton	NJ	08610-2412
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Pharmerica	Occupation Consultant Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Astore Anthony		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 7 Hempstead Rd		<b>Transaction ID:</b> 070606-7
City	State	Zip Code
Trenton	NJ	08610-2412
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Pharmerica	Occupation Consultant Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> 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 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Scott Arledge

Mailing Address 6026 Osprey Lake Circle

City Riverview State FL Zip Code 33569-3958

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

Name of Employer PharMerica Occupation SVP; Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 999.96

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2006

**Transaction ID: 062006-5**

Amount of Each Receipt this Period  
76.92

**B.** Full Name (Last, First, Middle Initial)  
Scott Arledge

Mailing Address 6026 Osprey Lake Circle

City Riverview State FL Zip Code 33569-3958

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

Name of Employer PharMerica Occupation SVP; Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 999.96

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2006

**Transaction ID: 060706-5**

Amount of Each Receipt this Period  
76.92

**C.** Full Name (Last, First, Middle Initial)  
Scott Arledge

Mailing Address 6026 Osprey Lake Circle

City Riverview State FL Zip Code 33569-3958

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

Name of Employer PharMerica Occupation SVP; Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 999.96

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2006

**Transaction ID: 070606-5**

Amount of Each Receipt this Period  
76.92

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>230.76</b>
<b>TOTAL</b> 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 10 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Klinkel Barbara		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 2928 Falls Dr		<b>Transaction ID:</b> 062006-42	
City Rapid City	State SD	Amount of Each Receipt this Period 25.00	
Zip Code 57702-5006			
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Klinkel Barbara		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 2928 Falls Dr		<b>Transaction ID:</b> 060706-42	
City Rapid City	State SD	Amount of Each Receipt this Period 25.00	
Zip Code 57702-5006			
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Klinkel Barbara		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 2928 Falls Dr		<b>Transaction ID:</b> 070606-42	
City Rapid City	State SD	Amount of Each Receipt this Period 25.00	
Zip Code 57702-5006			
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
John Baughman

Mailing Address 2432 Atchison Ave

City Lawrence State KS Zip Code 66047-2619

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

Name of Employer Pharmerica Occupation Consultant Pharmacist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

**Transaction ID: 062006-9**

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 2432 Atchison Ave

City Lawrence State KS Zip Code 66047-2619

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

Name of Employer Pharmerica Occupation Consultant Pharmacist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

**Transaction ID: 060706-9**

Amount of Each Receipt this Period  
 25.00

**C.** Full Name (Last, First, Middle Initial)  
John Baughman

Mailing Address 2432 Atchison Ave

City Lawrence State KS Zip Code 66047-2619

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

Name of Employer Pharmerica Occupation Consultant Pharmacist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

**Transaction ID: 070606-9**

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Janet A Britt

Mailing Address 1021 Peachwood Drive

City State Zip Code  
Brandon FL 33510-2577

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

Name of Employer Occupation  
PharMerica VP; Contracts And Pricing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2006

Transaction ID: 062006-11

Amount of Each Receipt this Period  
38.46

**B.** Full Name (Last, First, Middle Initial)  
Janet A Britt

Mailing Address 1021 Peachwood Drive

City State Zip Code  
Brandon FL 33510-2577

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

Name of Employer Occupation  
PharMerica VP; Contracts And Pricing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2006

Transaction ID: 060706-11

Amount of Each Receipt this Period  
38.46

**C.** Full Name (Last, First, Middle Initial)  
Janet A Britt

Mailing Address 1021 Peachwood Drive

City State Zip Code  
Brandon FL 33510-2577

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

Name of Employer Occupation  
PharMerica VP; Contracts And Pricing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2006

Transaction ID: 070606-11

Amount of Each Receipt this Period  
38.46

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>115.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 61
	<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) <b>A. Ashy Charles</b>		Date of Receipt MM / DD / YYYY 06 / 16 / 2006
Mailing Address 4406 Effie St		<b>Transaction ID: 062006-6</b>
City Bellaire	State TX	Zip Code 77401-5617
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Dir; Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>B. Ashy Charles</b>		Date of Receipt MM / DD / YYYY 06 / 02 / 2006
Mailing Address 4406 Effie St		<b>Transaction ID: 060706-6</b>
City Bellaire	State TX	Zip Code 77401-5617
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Dir; Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>C. Ashy Charles</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 4406 Effie St		<b>Transaction ID: 070606-6</b>
City Bellaire	State TX	Zip Code 77401-5617
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Dir; Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.57
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 61
	<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) <b>A.</b> Zinn Cheryl		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 4008 September Song Dr		<b>Transaction ID:</b> 062006-83	
City Manchaca	State TX	Amount of Each Receipt this Period 20.19	
Zip Code 78652-3028			
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>B.</b> Zinn Cheryl		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 4008 September Song Dr		<b>Transaction ID:</b> 060706-83	
City Manchaca	State TX	Amount of Each Receipt this Period 20.19	
Zip Code 78652-3028			
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>C.</b> Zinn Cheryl		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 4008 September Song Dr		<b>Transaction ID:</b> 070606-83	
City Manchaca	State TX	Amount of Each Receipt this Period 20.19	
Zip Code 78652-3028			
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.57
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 61
	<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) <b>A.</b> Stephen Coffey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 6 Bright Water Dr		<b>Transaction ID:</b> 062006-15	
City Warwick	State RI	Amount of Each Receipt this Period 20.19	
Zip Code 02886-8575		Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19	
Name of Employer Pharmerica	Occupation Mgr; General	Amount of Each Receipt this Period 20.19	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	Amount of Each Receipt this Period 20.19	

Full Name (Last, First, Middle Initial) <b>B.</b> Stephen Coffey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 6 Bright Water Dr		<b>Transaction ID:</b> 060706-15	
City Warwick	State RI	Amount of Each Receipt this Period 20.19	
Zip Code 02886-8575		Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19	
Name of Employer Pharmerica	Occupation Mgr; General	Amount of Each Receipt this Period 20.19	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	Amount of Each Receipt this Period 20.19	

Full Name (Last, First, Middle Initial) <b>C.</b> Stephen Coffey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 6 Bright Water Dr		<b>Transaction ID:</b> 070606-15	
City Warwick	State RI	Amount of Each Receipt this Period 20.19	
Zip Code 02886-8575		Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19	
Name of Employer Pharmerica	Occupation Mgr; General	Amount of Each Receipt this Period 20.19	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	Amount of Each Receipt this Period 20.19	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.57
<b>TOTAL</b> This Period (last page this line number only) .....	60.57

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 61
	<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) <b>A.</b> Patrick Daugherty		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 419 Summer Sails Dr		<b>Transaction ID:</b> 062006-17	
City Valrico      State FL      Zip Code 33594-8020	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Dir; Reg Reimbursement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>B.</b> Patrick Daugherty		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 419 Summer Sails Dr		<b>Transaction ID:</b> 060706-17	
City Valrico      State FL      Zip Code 33594-8020	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Dir; Reg Reimbursement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>C.</b> Patrick Daugherty		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 419 Summer Sails Dr		<b>Transaction ID:</b> 070606-17	
City Valrico      State FL      Zip Code 33594-8020	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Dir; Reg Reimbursement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> 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 17 / 61
	<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) <b>A.</b> Cole David		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 1213 Augusta Dr		Transaction ID: 062006-16	
City Shelbyville	State KY	Amount of Each Receipt this Period 25.00	
Zip Code 40065-9033			
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Cole David		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 1213 Augusta Dr		Transaction ID: 060706-16	
City Shelbyville	State KY	Amount of Each Receipt this Period 25.00	
Zip Code 40065-9033			
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Cole David		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1213 Augusta Dr		Transaction ID: 070606-16	
City Shelbyville	State KY	Amount of Each Receipt this Period 25.00	
Zip Code 40065-9033			
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1700 15th Ave S

City State Zip Code  
Great Falls MT 59405-4819

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2006

**Transaction ID: 062006-67**

Amount of Each Receipt this Period  
20.19

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

Mailing Address 1700 15th Ave S

City State Zip Code  
Great Falls MT 59405-4819

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2006

**Transaction ID: 060706-67**

Amount of Each Receipt this Period  
20.19

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

Mailing Address 1700 15th Ave S

City State Zip Code  
Great Falls MT 59405-4819

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2006

**Transaction ID: 070606-67**

Amount of Each Receipt this Period  
20.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.57
<b>TOTAL</b> 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 19 / 61
	(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 Inc. Political Action Committee (PPAC)

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

Mailing Address 82 Wall St

City State Zip Code  
Coventry CT 06238-3143

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

Name of Employer Occupation  
Pharmerica VP; LTC Operations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 16 / 2006

**Transaction ID:** 062006-19

Amount of Each Receipt this Period  
38.46

**B.** Full Name (Last, First, Middle Initial)  
Peter DePaola

Mailing Address 82 Wall St

City State Zip Code  
Coventry CT 06238-3143

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

Name of Employer Occupation  
Pharmerica VP; LTC Operations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 02 / 2006

**Transaction ID:** 060706-19

Amount of Each Receipt this Period  
38.46

**C.** Full Name (Last, First, Middle Initial)  
Peter DePaola

Mailing Address 82 Wall St

City State Zip Code  
Coventry CT 06238-3143

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

Name of Employer Occupation  
Pharmerica VP; LTC Operations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2006

**Transaction ID:** 070606-19

Amount of Each Receipt this Period  
38.46

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	115.38
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Todd Dipprey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 1401 7th St		<b>Transaction ID:</b> 062006-20	
City Shallowater	State TX	Amount of Each Receipt this Period 20.19	
Zip Code 79363-5105		Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19	
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>B.</b> Todd Dipprey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 1401 7th St		<b>Transaction ID:</b> 060706-20	
City Shallowater	State TX	Amount of Each Receipt this Period 20.19	
Zip Code 79363-5105		Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19	
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>C.</b> Todd Dipprey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1401 7th St		<b>Transaction ID:</b> 070606-20	
City Shallowater	State TX	Amount of Each Receipt this Period 20.19	
Zip Code 79363-5105		Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19	
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60.57
<b>TOTAL</b> This Period (last page this line number only) .....	60.57

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Montgomery Doris

Mailing Address 293 Townsend Loop

City Parsons State TN Zip Code 38363-3339

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

Name of Employer Pharmerica Occupation Dir; IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2006

**Transaction ID: 062006-53**

Amount of Each Receipt this Period  
20.19

**B.** Full Name (Last, First, Middle Initial)  
Montgomery Doris

Mailing Address 293 Townsend Loop

City Parsons State TN Zip Code 38363-3339

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

Name of Employer Pharmerica Occupation Dir; IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2006

**Transaction ID: 060706-53**

Amount of Each Receipt this Period  
20.19

**C.** Full Name (Last, First, Middle Initial)  
Montgomery Doris

Mailing Address 293 Townsend Loop

City Parsons State TN Zip Code 38363-3339

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

Name of Employer Pharmerica Occupation Dir; IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2006

**Transaction ID: 070606-53**

Amount of Each Receipt this Period  
20.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.57
<b>TOTAL</b> 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 22 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Finch Mailing Address 12236 Juniper St City Overland Park State KS Zip Code 66209-1591 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>6</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 062006-23 Amount of Each Receipt this Period <table border="1"> <tr> <td>20.19</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	6		2	0	0	6	20.19
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	6		2	0	0	6														
20.19																							
Name of Employer: Pharmerica Occupation: Mgr; General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>262.47</td> </tr> </table>		262.47																					
262.47																							

<b>B.</b> Full Name (Last, First, Middle Initial) Ronald Finch Mailing Address 12236 Juniper St City Overland Park State KS Zip Code 66209-1591 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 060706-23 Amount of Each Receipt this Period <table border="1"> <tr> <td>20.19</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	0	6	20.19
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		0	2		2	0	0	6														
20.19																							
Name of Employer: Pharmerica Occupation: Mgr; General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>262.47</td> </tr> </table>		262.47																					
262.47																							

<b>C.</b> Full Name (Last, First, Middle Initial) Ronald Finch Mailing Address 12236 Juniper St City Overland Park State KS Zip Code 66209-1591 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 070606-23 Amount of Each Receipt this Period <table border="1"> <tr> <td>20.19</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	6	20.19
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		3	0		2	0	0	6														
20.19																							
Name of Employer: Pharmerica Occupation: Mgr; General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>262.47</td> </tr> </table>		262.47																					
262.47																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>60.57</b>
<b>TOTAL</b> 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 23 / 61
	<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) <b>A.</b> Christopher G Flori		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 6726 Mammoth Avenue		Transaction ID: 062006-24	
City State Zip Code Van Nuys CA 91405-4814	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Dir; Process Improvement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Christopher G Flori		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 6726 Mammoth Avenue		Transaction ID: 060706-24	
City State Zip Code Van Nuys CA 91405-4814	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Dir; Process Improvement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Christopher G Flori		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 6726 Mammoth Avenue		Transaction ID: 070606-24	
City State Zip Code Van Nuys CA 91405-4814	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Dir; Process Improvement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> 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 24 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 9539 Norchester Circle

City Tampa State FL Zip Code 33647-1846

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

Name of Employer PharMerica Occupation Dir; Qa & Trng/Documentation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

**Transaction ID:** 062006-25

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 9539 Norchester Circle

City Tampa State FL Zip Code 33647-1846

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

Name of Employer PharMerica Occupation Dir; Qa & Trng/Documentation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

**Transaction ID:** 060706-25

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 9539 Norchester Circle

City Tampa State FL Zip Code 33647-1846

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

Name of Employer PharMerica Occupation Dir; Qa & Trng/Documentation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

**Transaction ID:** 070606-25

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> 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 25 / 61
	<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)

<b>A.</b> Full Name (Last, First, Middle Initial) Cayer George Mailing Address 27 Staci Dr City Bridgewater State MA Zip Code 02324-2272 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>6</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 062006-14 Amount of Each Receipt this Period <table border="1"> <tr> <td>20.19</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	6		2	0	0	6	20.19
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	6		2	0	0	6														
20.19																							
Name of Employer: Pharmerica Occupation: Mgr; General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>262.47</td> </tr> </table>		262.47																					
262.47																							

<b>B.</b> Full Name (Last, First, Middle Initial) Cayer George Mailing Address 27 Staci Dr City Bridgewater State MA Zip Code 02324-2272 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 060706-14 Amount of Each Receipt this Period <table border="1"> <tr> <td>20.19</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	0	6	20.19
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		0	2		2	0	0	6														
20.19																							
Name of Employer: Pharmerica Occupation: Mgr; General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>262.47</td> </tr> </table>		262.47																					
262.47																							

<b>C.</b> Full Name (Last, First, Middle Initial) Cayer George Mailing Address 27 Staci Dr City Bridgewater State MA Zip Code 02324-2272 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 070606-14 Amount of Each Receipt this Period <table border="1"> <tr> <td>20.19</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	6	20.19
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		3	0		2	0	0	6														
20.19																							
Name of Employer: Pharmerica Occupation: Mgr; General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>262.47</td> </tr> </table>		262.47																					
262.47																							

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1"> <tr> <td>60.57</td> </tr> </table>	60.57
60.57		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 61
	<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) <b>A.</b> Lois Grubb		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 909 Hemingway Circle		<b>Transaction ID:</b> 062006-30	
City Tampa	State FL	Amount of Each Receipt this Period 76.92	
Zip Code 33602-5980			
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ 999.96		

Full Name (Last, First, Middle Initial) <b>B.</b> Lois Grubb		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 909 Hemingway Circle		<b>Transaction ID:</b> 060706-30	
City Tampa	State FL	Amount of Each Receipt this Period 76.92	
Zip Code 33602-5980			
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ 999.96		

Full Name (Last, First, Middle Initial) <b>C.</b> Lois Grubb		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 909 Hemingway Circle		<b>Transaction ID:</b> 070606-30	
City Tampa	State FL	Amount of Each Receipt this Period 76.92	
Zip Code 33602-5980			
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ 999.96		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	230.76
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 137 Tattershall Ct

City Macon State GA Zip Code 31210-2174

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

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

**Transaction ID:** 062006-10

Amount of Each Receipt this Period  
 20.19

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

Mailing Address 137 Tattershall Ct

City Macon State GA Zip Code 31210-2174

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

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

**Transaction ID:** 060706-10

Amount of Each Receipt this Period  
 20.19

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

Mailing Address 137 Tattershall Ct

City Macon State GA Zip Code 31210-2174

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

**Transaction ID:** 070606-10

Amount of Each Receipt this Period  
 20.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.57
<b>TOTAL</b> 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 28 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 9282 Airdrome Street

City State Zip Code  
Los Angeles CA 90035-3281

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

Name of Employer Occupation  
PharMerica VP; LTC Operations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2006

**Transaction ID: 062006-33**

Amount of Each Receipt this Period  
38.46

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

Mailing Address 9282 Airdrome Street

City State Zip Code  
Los Angeles CA 90035-3281

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

Name of Employer Occupation  
PharMerica VP; LTC Operations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2006

**Transaction ID: 060706-33**

Amount of Each Receipt this Period  
38.46

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

Mailing Address 9282 Airdrome Street

City State Zip Code  
Los Angeles CA 90035-3281

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

Name of Employer Occupation  
PharMerica VP; LTC Operations

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2006

**Transaction ID: 070606-33**

Amount of Each Receipt this Period  
38.46

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>115.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Palin Jay		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 10528 Chestnut Hill		<b>Transaction ID:</b> 062006-59	
City State Zip Code Fishers IN 46038	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation VP; LTC Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Palin Jay		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 10528 Chestnut Hill		<b>Transaction ID:</b> 060706-59	
City State Zip Code Fishers IN 46038	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation VP; LTC Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Palin Jay		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 10528 Chestnut Hill		<b>Transaction ID:</b> 070606-59	
City State Zip Code Fishers IN 46038	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation VP; LTC Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 4021 Audubon Dr

City State Zip Code  
Largo FL 33771-3309

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2006

**Transaction ID: 062006-36**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 4021 Audubon Dr

City State Zip Code  
Largo FL 33771-3309

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2006

**Transaction ID: 060706-36**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 4021 Audubon Dr

City State Zip Code  
Largo FL 33771-3309

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2006

**Transaction ID: 070606-36**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 61
	<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)

**A.** Full Name (Last, First, Middle Initial)  
Dong Juanita

Mailing Address 6054 Lake Trace Cir

City State Zip Code  
Jackson MS 39211-2803

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2006

**Transaction ID:** 062006-21

Amount of Each Receipt this Period  
20.19

**B.** Full Name (Last, First, Middle Initial)  
Dong Juanita

Mailing Address 6054 Lake Trace Cir

City State Zip Code  
Jackson MS 39211-2803

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2006

**Transaction ID:** 060706-21

Amount of Each Receipt this Period  
20.19

**C.** Full Name (Last, First, Middle Initial)  
Dong Juanita

Mailing Address 6054 Lake Trace Cir

City State Zip Code  
Jackson MS 39211-2803

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2006

**Transaction ID:** 070606-21

Amount of Each Receipt this Period  
20.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.57
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Skarnagel Julie

Mailing Address 6792 Copper Ridge Dr

City State Zip Code  
El Paso TX 79912-8101

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2006

**Transaction ID: 062006-75**

Amount of Each Receipt this Period  
20.19

**B.** Full Name (Last, First, Middle Initial)  
Skarnagel Julie

Mailing Address 6792 Copper Ridge Dr

City State Zip Code  
El Paso TX 79912-8101

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2006

**Transaction ID: 060706-75**

Amount of Each Receipt this Period  
20.19

**C.** Full Name (Last, First, Middle Initial)  
Skarnagel Julie

Mailing Address 6792 Copper Ridge Dr

City State Zip Code  
El Paso TX 79912-8101

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

Name of Employer Occupation  
Pharmerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2006

**Transaction ID: 070606-75**

Amount of Each Receipt this Period  
20.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>60.57</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 61
	<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) <b>A.</b> Shanard-Koenders Kari		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 3005 W Spruceleigh Ct		<b>Transaction ID:</b> 062006-72
City State Zip Code Sioux Falls SD 57105-0170	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Dir; Utilization Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>B.</b> Shanard-Koenders Kari		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 3005 W Spruceleigh Ct		<b>Transaction ID:</b> 060706-72
City State Zip Code Sioux Falls SD 57105-0170	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Dir; Utilization Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>C.</b> Shanard-Koenders Kari		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 3005 W Spruceleigh Ct		<b>Transaction ID:</b> 070606-72
City State Zip Code Sioux Falls SD 57105-0170	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Dir; Utilization Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 61
	<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) <b>A.</b> Robert Ketchum		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 2244 Vanessa Dr		<b>Transaction ID:</b> 062006-38	
City Birmingham	State AL	Amount of Each Receipt this Period 25.00	
Zip Code 35242-4430			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Robert Ketchum		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 2244 Vanessa Dr		<b>Transaction ID:</b> 060706-38	
City Birmingham	State AL	Amount of Each Receipt this Period 25.00	
Zip Code 35242-4430			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Robert Ketchum		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 2244 Vanessa Dr		<b>Transaction ID:</b> 070606-38	
City Birmingham	State AL	Amount of Each Receipt this Period 25.00	
Zip Code 35242-4430			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	75.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 61
	(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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> James P Kilgus		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 37 Paul Avenue		<b>Transaction ID:</b> 062006-39	
City Warwick	State RI	Amount of Each Receipt this Period 20.19	
Zip Code 02886-7316		Transaction ID: 062006-39	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19	
Name of Employer PharMerica	Occupation Dir; Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>B.</b> James P Kilgus		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 37 Paul Avenue		<b>Transaction ID:</b> 060706-39	
City Warwick	State RI	Amount of Each Receipt this Period 20.19	
Zip Code 02886-7316		Transaction ID: 060706-39	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19	
Name of Employer PharMerica	Occupation Dir; Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>C.</b> James P Kilgus		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 37 Paul Avenue		<b>Transaction ID:</b> 070606-39	
City Warwick	State RI	Amount of Each Receipt this Period 20.19	
Zip Code 02886-7316		Transaction ID: 070606-39	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19	
Name of Employer PharMerica	Occupation Dir; Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 61
	(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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> Mark Kirasich		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 7185 Crystal View Drive Southeast		<b>Transaction ID:</b> 062006-41
City State Zip Code Caledonia MI 49316-7717	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		
Name of Employer PharMerica	Occupation Mgr; General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>B.</b> Mark Kirasich		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 7185 Crystal View Drive Southeast		<b>Transaction ID:</b> 060706-41
City State Zip Code Caledonia MI 49316-7717	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		
Name of Employer PharMerica	Occupation Mgr; General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>C.</b> Mark Kirasich		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 7185 Crystal View Drive Southeast		<b>Transaction ID:</b> 070606-41
City State Zip Code Caledonia MI 49316-7717	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		
Name of Employer PharMerica	Occupation Mgr; General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 61		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

Full Name (Last, First, Middle Initial) <b>A.</b> Michael Koski		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 1310 Jersey Ave N		<b>Transaction ID:</b> 062006-43	
City State Zip Code Golden Valley MN 55427-4646	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Chief Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Michael Koski		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 1310 Jersey Ave N		<b>Transaction ID:</b> 060706-43	
City State Zip Code Golden Valley MN 55427-4646	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Chief Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Michael Koski		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1310 Jersey Ave N		<b>Transaction ID:</b> 070606-43	
City State Zip Code Golden Valley MN 55427-4646	Amount of Each Receipt this Period 21.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Chief Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	63.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 61
	<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) <b>A.</b> Reis Larry		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 6036 E Illinois Ave		<b>Transaction ID:</b> 062006-62	
City State Zip Code Fresno CA 93727-6801	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Dir; Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>B.</b> Reis Larry		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 6036 E Illinois Ave		<b>Transaction ID:</b> 060706-62	
City State Zip Code Fresno CA 93727-6801	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Dir; Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>C.</b> Reis Larry		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 6036 E Illinois Ave		<b>Transaction ID:</b> 070606-62	
City State Zip Code Fresno CA 93727-6801	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Dir; Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 61		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

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

Full Name (Last, First, Middle Initial) <b>A.</b> Larry A Litzmann		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 5617 Skimmer Drive		<b>Transaction ID:</b> 062006-46	
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. <b>C</b>			
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 ▼ 1300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Larry A Litzmann		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 5617 Skimmer Drive		<b>Transaction ID:</b> 060706-46	
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. <b>C</b>			
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 ▼ 1300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Larry A Litzmann		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 5617 Skimmer Drive		<b>Transaction ID:</b> 070606-46	
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. <b>C</b>			
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 ▼ 1300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 61
	<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) <b>A.</b> James Loftin		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 1836 Windsong Cr		<b>Transaction ID:</b> 062006-47	
City State Zip Code Keller TX 76248	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98		

Full Name (Last, First, Middle Initial) <b>B.</b> James Loftin		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 1836 Windsong Cr		<b>Transaction ID:</b> 060706-47	
City State Zip Code Keller TX 76248	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98		

Full Name (Last, First, Middle Initial) <b>C.</b> James Loftin		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1836 Windsong Cr		<b>Transaction ID:</b> 070606-47	
City State Zip Code Keller TX 76248	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	115.38
<b>TOTAL</b> 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 41 / 61						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

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

Full Name (Last, First, Middle Initial) <b>A.</b> Martin Michael		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 4769 Greenview Ct		<b>Transaction ID:</b> 062006-49	
City State Zip Code Commerce Township MI 48382-1563	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>B.</b> Martin Michael		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 4769 Greenview Ct		<b>Transaction ID:</b> 060706-49	
City State Zip Code Commerce Township MI 48382-1563	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>C.</b> Martin Michael		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 4769 Greenview Ct		<b>Transaction ID:</b> 070606-49	
City State Zip Code Commerce Township MI 48382-1563	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 61
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Bobby Mink

Mailing Address 16199 Audrey Ln

City Arp State TX Zip Code 75750-4117

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

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

**Transaction ID: 062006-51**

Amount of Each Receipt this Period  
 20.19

**B.** Full Name (Last, First, Middle Initial)  
Bobby Mink

Mailing Address 16199 Audrey Ln

City Arp State TX Zip Code 75750-4117

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

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

**Transaction ID: 060706-51**

Amount of Each Receipt this Period  
 20.19

**C.** Full Name (Last, First, Middle Initial)  
Bobby Mink

Mailing Address 16199 Audrey Ln

City Arp State TX Zip Code 75750-4117

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

**Transaction ID: 070606-51**

Amount of Each Receipt this Period  
 20.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.57
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 61
	<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)

**A.** Full Name (Last, First, Middle Initial)  
Richard G Momberger

Mailing Address 12714 Flint Lake Drive

City State Zip Code  
Thonotosassa FL 33592-3850

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

Name of Employer Occupation  
PharMerica VP; Support Services

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2006

**Transaction ID: 062006-52**

Amount of Each Receipt this Period  
38.46

**B.** Full Name (Last, First, Middle Initial)  
Richard G Momberger

Mailing Address 12714 Flint Lake Drive

City State Zip Code  
Thonotosassa FL 33592-3850

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

Name of Employer Occupation  
PharMerica VP; Support Services

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2006

**Transaction ID: 060706-52**

Amount of Each Receipt this Period  
38.46

**C.** Full Name (Last, First, Middle Initial)  
Richard G Momberger

Mailing Address 12714 Flint Lake Drive

City State Zip Code  
Thonotosassa FL 33592-3850

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

Name of Employer Occupation  
PharMerica VP; Support Services

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2006

**Transaction ID: 070606-52**

Amount of Each Receipt this Period  
38.46

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>115.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 61
	<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

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

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

**A.** Full Name (Last, First, Middle Initial)  
Richard W Mosholder

Mailing Address 4061 Kingston Terrace

City State Zip Code  
Sarasota FL 34238-2633

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

Name of Employer Occupation  
PharMerica VP; Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

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

**Transaction ID:** 062006-55

Amount of Each Receipt this Period  
38.46

**B.** Full Name (Last, First, Middle Initial)  
Richard W Mosholder

Mailing Address 4061 Kingston Terrace

City State Zip Code  
Sarasota FL 34238-2633

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

Name of Employer Occupation  
PharMerica VP; Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

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

**Transaction ID:** 060706-55

Amount of Each Receipt this Period  
38.46

**C.** Full Name (Last, First, Middle Initial)  
Richard W Mosholder

Mailing Address 4061 Kingston Terrace

City State Zip Code  
Sarasota FL 34238-2633

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

Name of Employer Occupation  
PharMerica VP; Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 6

**Transaction ID:** 070606-55

Amount of Each Receipt this Period  
38.46

**SUBTOTAL** of Receipts This Page (optional) ..... ► **115.38**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 61
	<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) <b>A.</b> Christopher B Myers		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 1035 S Sterling Avenue		<b>Transaction ID:</b> 062006-57	
City Tampa	State FL	Zip Code 33629-5140	Amount of Each Receipt this Period 38.46
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation VP; Billing And Collections		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98		

Full Name (Last, First, Middle Initial) <b>B.</b> Christopher B Myers		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 1035 S Sterling Avenue		<b>Transaction ID:</b> 060706-57	
City Tampa	State FL	Zip Code 33629-5140	Amount of Each Receipt this Period 38.46
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation VP; Billing And Collections		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98		

Full Name (Last, First, Middle Initial) <b>C.</b> Christopher B Myers		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1035 S Sterling Avenue		<b>Transaction ID:</b> 070606-57	
City Tampa	State FL	Zip Code 33629-5140	Amount of Each Receipt this Period 38.46
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation VP; Billing And Collections		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	115.38
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 61
	<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) <b>A.</b> Ross Paul		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 4007 Shadowhill Ln		<b>Transaction ID:</b> 062006-65	
City Valrico	State FL	Amount of Each Receipt this Period 25.00	
Zip Code 33594-7214			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation VP; Compliance & Regulatory Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ross Paul		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 4007 Shadowhill Ln		<b>Transaction ID:</b> 060706-65	
City Valrico	State FL	Amount of Each Receipt this Period 25.00	
Zip Code 33594-7214			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation VP; Compliance & Regulatory Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ross Paul		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 4007 Shadowhill Ln		<b>Transaction ID:</b> 070606-65	
City Valrico	State FL	Amount of Each Receipt this Period 25.00	
Zip Code 33594-7214			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation VP; Compliance & Regulatory Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Ruskan Paula		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 12014 Meadow Hollow Dr		<b>Transaction ID:</b> 062006-68
City State Zip Code Stafford TX 77477-1516	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Mgr; General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>B.</b> Ruskan Paula		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 12014 Meadow Hollow Dr		<b>Transaction ID:</b> 060706-68
City State Zip Code Stafford TX 77477-1516	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Mgr; General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>C.</b> Ruskan Paula		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 12014 Meadow Hollow Dr		<b>Transaction ID:</b> 070606-68
City State Zip Code Stafford TX 77477-1516	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Mgr; General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> 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 48 / 61
	<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) <b>A.</b> Ronald G Perry		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 6434 Yvette Drive		<b>Transaction ID:</b> 062006-60
City State Zip Code Hudson FL 34667-1352	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PharMerica	Occupation Exec Dir; Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ronald G Perry		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 6434 Yvette Drive		<b>Transaction ID:</b> 060706-60
City State Zip Code Hudson FL 34667-1352	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PharMerica	Occupation Exec Dir; Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ronald G Perry		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 6434 Yvette Drive		<b>Transaction ID:</b> 070606-60
City State Zip Code Hudson FL 34667-1352	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PharMerica	Occupation Exec Dir; Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.00
<b>TOTAL</b> 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 49 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Michael S Rosenblum

Mailing Address 21 Dunwoodie Road

City State Zip Code  
Glenmont NY 12077-2903

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

Name of Employer Occupation  
PharMerica SVP; Strategic Planning Devel

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 999.96

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2006

**Transaction ID: 062006-64**

Amount of Each Receipt this Period  
76.92

**B.** Full Name (Last, First, Middle Initial)  
Michael S Rosenblum

Mailing Address 21 Dunwoodie Road

City State Zip Code  
Glenmont NY 12077-2903

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

Name of Employer Occupation  
PharMerica SVP; Strategic Planning Devel

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 999.96

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2006

**Transaction ID: 060706-64**

Amount of Each Receipt this Period  
76.92

**C.** Full Name (Last, First, Middle Initial)  
Michael S Rosenblum

Mailing Address 21 Dunwoodie Road

City State Zip Code  
Glenmont NY 12077-2903

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

Name of Employer Occupation  
PharMerica SVP; Strategic Planning Devel

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 999.96

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2006

**Transaction ID: 070606-64**

Amount of Each Receipt this Period  
76.92

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>230.76</b>
<b>TOTAL</b> 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 50 / 61
	<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

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) <b>A.</b> Timothy M Rowland		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 4450 Fullcry Circle		<b>Transaction ID:</b> 062006-66
City Zionsville	State IN	Zip Code 46077-8229
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer PharMerica	Occupation Dir; Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>B.</b> Timothy M Rowland		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 4450 Fullcry Circle		<b>Transaction ID:</b> 060706-66
City Zionsville	State IN	Zip Code 46077-8229
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer PharMerica	Occupation Dir; Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>C.</b> Timothy M Rowland		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 4450 Fullcry Circle		<b>Transaction ID:</b> 070606-66
City Zionsville	State IN	Zip Code 46077-8229
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer PharMerica	Occupation Dir; Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.57
<b>TOTAL</b> 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 51 / 61
	<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) <b>A.</b> Janice Rutkowski		Date of Receipt MM / DD / YYYY 06 / 16 / 2006
Mailing Address 1110 Abbeys Way		<b>Transaction ID:</b> 062006-69
City Tampa	State FL	Zip Code 33602-5957
FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 999.96	

Full Name (Last, First, Middle Initial) <b>B.</b> Janice Rutkowski		Date of Receipt MM / DD / YYYY 06 / 02 / 2006
Mailing Address 1110 Abbeys Way		<b>Transaction ID:</b> 060706-69
City Tampa	State FL	Zip Code 33602-5957
FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 999.96	

Full Name (Last, First, Middle Initial) <b>C.</b> Janice Rutkowski		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 1110 Abbeys Way		<b>Transaction ID:</b> 070606-69
City Tampa	State FL	Zip Code 33602-5957
FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 999.96	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>230.76</b>
<b>TOTAL</b> 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 52 / 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A.</b> Elizabeth O Shanks		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 1239 Pristine Place		<b>Transaction ID:</b> 062006-73
City State Zip Code Lutz FL 33549-9314	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation PharMerica Dir; Account Mgmt Programs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Elizabeth O Shanks		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 1239 Pristine Place		<b>Transaction ID:</b> 060706-73
City State Zip Code Lutz FL 33549-9314	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation PharMerica Dir; Account Mgmt Programs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Elizabeth O Shanks		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1239 Pristine Place		<b>Transaction ID:</b> 070606-73
City State Zip Code Lutz FL 33549-9314	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation PharMerica Dir; Account Mgmt Programs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> 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 53 / 61
	<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) <b>A.</b> William G Shields		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 918 Hemingway Circle		<b>Transaction ID:</b> 062006-74
City Tampa State FL Zip Code 33602-5980	Amount of Each Receipt this Period 192.31	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PharMerica Occupation President; Long Term Care	Aggregate Year-to-Date ▼ 2500.03	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> William G Shields		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 918 Hemingway Circle		<b>Transaction ID:</b> 060706-74
City Tampa State FL Zip Code 33602-5980	Amount of Each Receipt this Period 192.31	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PharMerica Occupation President; Long Term Care	Aggregate Year-to-Date ▼ 2500.03	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> William G Shields		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 918 Hemingway Circle		<b>Transaction ID:</b> 070606-74
City Tampa State FL Zip Code 33602-5980	Amount of Each Receipt this Period 192.31	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PharMerica Occupation President; Long Term Care	Aggregate Year-to-Date ▼ 2500.03	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.93
<b>TOTAL</b> 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 54 / 61
	<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) <b>A.</b> Allard Terry		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 2812 Wingren Rd		<b>Transaction ID:</b> 062006-2
City Irving State TX Zip Code 75062-4518	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Mgr; General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>B.</b> Allard Terry		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 2812 Wingren Rd		<b>Transaction ID:</b> 060706-2
City Irving State TX Zip Code 75062-4518	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Mgr; General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

Full Name (Last, First, Middle Initial) <b>C.</b> Allard Terry		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 2812 Wingren Rd		<b>Transaction ID:</b> 070606-2
City Irving State TX Zip Code 75062-4518	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Mgr; General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> 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 55 / 61
	<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) <b>A.</b> Griffin Thomas		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 10903 Ledgement Ln		<b>Transaction ID:</b> 062006-28
City State Zip Code Windermere FL 34786-6423	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Pharmerica Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Griffin Thomas		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 10903 Ledgement Ln		<b>Transaction ID:</b> 060706-28
City State Zip Code Windermere FL 34786-6423	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Pharmerica Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Griffin Thomas		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 10903 Ledgement Ln		<b>Transaction ID:</b> 070606-28
City State Zip Code Windermere FL 34786-6423	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Pharmerica Mgr; General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> 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 56 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Atkinson Tracy

Mailing Address 22 Evening Star Loop

City Edgewood State NM Zip Code 87015-8703

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

**Transaction ID:** 062006-8

Amount of Each Receipt this Period  
 25.00

**B.** Full Name (Last, First, Middle Initial)  
Atkinson Tracy

Mailing Address 22 Evening Star Loop

City Edgewood State NM Zip Code 87015-8703

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

**Transaction ID:** 060706-8

Amount of Each Receipt this Period  
 25.00

**C.** Full Name (Last, First, Middle Initial)  
Atkinson Tracy

Mailing Address 22 Evening Star Loop

City Edgewood State NM Zip Code 87015-8703

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

**Transaction ID:** 070606-8

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> 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 57 / 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Manuele Victor

Mailing Address 1014 N Ridge Rd

City Chadds Ford State PA Zip Code 19317-9446

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

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

**Transaction ID: 062006-48**

Amount of Each Receipt this Period  
 20.19

**B.** Full Name (Last, First, Middle Initial)  
Manuele Victor

Mailing Address 1014 N Ridge Rd

City Chadds Ford State PA Zip Code 19317-9446

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

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

**Transaction ID: 060706-48**

Amount of Each Receipt this Period  
 20.19

**C.** Full Name (Last, First, Middle Initial)  
Manuele Victor

Mailing Address 1014 N Ridge Rd

City Chadds Ford State PA Zip Code 19317-9446

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

Name of Employer Pharmerica Occupation Mgr; General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

**Transaction ID: 070606-48**

Amount of Each Receipt this Period  
 20.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.57
<b>TOTAL</b> 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 58 / 61	
	(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 Inc. Political Action Committee (PPAC)

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

Mailing Address 1605 S Dakota Ave

City State Zip Code  
Sioux Falls SD 57105-1818

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

Name of Employer Occupation  
PharMerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2006

**Transaction ID:** 062006-80

Amount of Each Receipt this Period  
25.00

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

Mailing Address 1605 S Dakota Ave

City State Zip Code  
Sioux Falls SD 57105-1818

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

Name of Employer Occupation  
PharMerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2006

**Transaction ID:** 060706-80

Amount of Each Receipt this Period  
25.00

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

Mailing Address 1605 S Dakota Ave

City State Zip Code  
Sioux Falls SD 57105-1818

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

Name of Employer Occupation  
PharMerica Mgr; General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2006

**Transaction ID:** 070606-80

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>75.00</b>
<b>TOTAL</b> 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 59 / 61
	(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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A. Stearns Wendy</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address 3443 Sunbeam Dr		<b>Transaction ID: 062006-76</b>	
City State Zip Code Sarasota FL 34240-9335	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Dir; Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>B. Stearns Wendy</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address 3443 Sunbeam Dr		<b>Transaction ID: 060706-76</b>	
City State Zip Code Sarasota FL 34240-9335	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Dir; Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

Full Name (Last, First, Middle Initial) <b>C. Stearns Wendy</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 3443 Sunbeam Dr		<b>Transaction ID: 070606-76</b>	
City State Zip Code Sarasota FL 34240-9335	Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Dir; Clinical Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> 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 60 / 61						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

**A.** Full Name (Last, First, Middle Initial)  
Sheri L Zapp

Mailing Address 1663 E Montoya Lane

City State Zip Code  
Phoenix AZ 85024-4325

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

Name of Employer Occupation  
PharMerica Reg Dir; Account Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2006

**Transaction ID:** 062006-81

Amount of Each Receipt this Period  
20.00

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

Mailing Address 1663 E Montoya Lane

City State Zip Code  
Phoenix AZ 85024-4325

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

Name of Employer Occupation  
PharMerica Reg Dir; Account Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2006

**Transaction ID:** 060706-81

Amount of Each Receipt this Period  
20.00

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

Mailing Address 1663 E Montoya Lane

City State Zip Code  
Phoenix AZ 85024-4325

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

Name of Employer Occupation  
PharMerica Reg Dir; Account Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2006

**Transaction ID:** 070606-81

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>60.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>5374.31</b>

# 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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A. Friends of Clay Shaw</b>		<b>Transaction ID:</b> 1290020607175795734 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address PO Box 2188 2600 NE 14Th. Street Causeway		Amount of Each Disbursement this Period 2500.00
City Fort Lauderdale State FL Zip Code 33303	Category/ Type	
Purpose of Disbursement 2006 General		
Candidate Name Shaw E.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of Mark Foley</b>		<b>Transaction ID:</b> 1954750607175775331 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address 1316 Lake Victoria Drive		Amount of Each Disbursement this Period 1000.00
City Lake Worth State FL Zip Code 33461	Category/ Type	
Purpose of Disbursement 2006 Primary		
Candidate Name Foley Mark		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Pickering for Congress</b>		<b>Transaction ID:</b> 7065190607175768076 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address PO Box 4297		Amount of Each Disbursement this Period 5000.00
City Brandon State MS Zip Code 39047	Category/ Type	
Purpose of Disbursement 2006 General		
Candidate Name Pickering Charles		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>8500.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>8500.00</b>