

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 12 01 2007 through 12 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Teri Hartlage  
Signature of Treasurer Electronically Filed by Teri Hartlage Date 01 16 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |          |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand<br>January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 7 |  | 64827.41 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |          |
| 2   | 0                       | 0                                 | 7 |   |   |   |   |   |  |          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 89679.17                |                                   |   |   |   |   |   |   |  |          |
| (c) Total Receipts (from Line 19) .....   | 1986.43                 | 34338.19                          |   |   |   |   |   |   |  |          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 91665.60                | 99165.60                          |   |   |   |   |   |   |  |          |
| 7. Total Disbursements (from Line 31) .....   | 0.00                    | 7500.00                           |   |   |   |   |   |   |  |          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 91665.60                | 91665.60                          |   |   |   |   |   |   |  |          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |          |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |   |   |   |   |   |   |  |          |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 1904.43                       | 21418.61                          |
| (i) Itemized (use Schedule A) .....  |                               |                                   |
| (ii) Unitemized .....  | 82.00                         | 12919.58                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 1986.43                       | 34338.19                          |
| (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) .....     | 1986.43                       | 34338.19                          |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 1986.43                       | 34338.19                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 1986.43                       | 34338.19                          |

**DETAILED SUMMARY PAGE**

of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |                               |                                   |
| (i) Federal Share.....   | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures.....  | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                          | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 7500.00                           |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00                          | 0.00                              |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00                          | 0.00                              |
| 29. Other Disbursements.....   | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C 431(20))  |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share .....   | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 0.00                          | 7500.00                           |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 0.00                          | 7500.00                           |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 1986.43                       | 34338.19                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 1986.43                       | 34338.19                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 0.00                          | 0.00                              |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 32  
(check only one)

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

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

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

**A.**

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

Mailing Address 24712 231st Ave SE

City State Zip Code  
Maple Valley WA 98038

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 121407-30

Amount of Each Receipt this Period  
20.19

**B.**

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

Mailing Address 24712 231st Ave SE

City State Zip Code  
Maple Valley WA 98038

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 122707-30

Amount of Each Receipt this Period  
20.19

**C.**

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

Mailing Address 7 Hempstead Road

City State Zip Code  
Trenton NJ 08610

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

Name of Employer Occupation  
Pharmerica Consultant Pharmacist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 121407-32

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **65.38**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 32  
(check only one)

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

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

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Anthony Astore</p> <p>Mailing Address 7 Hempstead Road</p> <p>City State Zip Code<br/>Trenton NJ 08610</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation<br/>Pharmerica Consultant Pharmacist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">650.00</span></p> | <p>Date of Receipt<br/><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br/>12 / 28 / 2007</p> <p><b>Transaction ID:</b> 122707-32</p> <p>Amount of Each Receipt this Period<br/><span style="border: 1px solid black; padding: 2px;">25.00</span></p> |
|---|---|

|   |   |
|---|---|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Tracy Atkinson</p> <p>Mailing Address 22 Evening Star Lp</p> <p>City State Zip Code<br/>Edgewood NM 87015</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation<br/>Pharmerica Manager, General</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">650.00</span></p> | <p>Date of Receipt<br/><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br/>12 / 14 / 2007</p> <p><b>Transaction ID:</b> 121407-22</p> <p>Amount of Each Receipt this Period<br/><span style="border: 1px solid black; padding: 2px;">25.00</span></p> |
|---|---|

|   |   |
|---|---|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Tracy Atkinson</p> <p>Mailing Address 22 Evening Star Lp</p> <p>City State Zip Code<br/>Edgewood NM 87015</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation<br/>Pharmerica Manager, General</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">650.00</span></p> | <p>Date of Receipt<br/><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br/>12 / 28 / 2007</p> <p><b>Transaction ID:</b> 122707-22</p> <p>Amount of Each Receipt this Period<br/><span style="border: 1px solid black; padding: 2px;">25.00</span></p> |
|---|---|

|  |   |
|--|---|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <span style="border: 1px solid black; padding: 2px;">75.00</span> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <span style="border: 1px solid black; padding: 2px;"> </span>     |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 32  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
John Baughman

Mailing Address 2432 Atchison Ave

City Lawrence State KS Zip Code 66047

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

Name of Employer Pharmerica Occupation Lead Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 4 | / | 2 | 0 | 0 | 7 |

**Transaction ID:** 121407-17

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

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

Name of Employer Pharmerica Occupation Lead Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 2 | 8 | / | 2 | 0 | 0 | 7 |

**Transaction ID:** 122707-17

Amount of Each Receipt this Period 25.00

**C.**

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

Mailing Address 137 Tatershall

City Macon State GA Zip Code 31210

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 4 | / | 2 | 0 | 0 | 7 |

**Transaction ID:** 121407-39

Amount of Each Receipt this Period 20.19

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

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 32  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 137 Tatershall

City State Zip Code  
Macon GA 31210

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt M M / D D / Y Y Y Y  
12 / 28 / 2007

**Transaction ID:** 122707-39

Amount of Each Receipt this Period 20.19

**B.** Full Name (Last, First, Middle Initial)  
Joann Camasso

Mailing Address 15 NE 20th Ave

City State Zip Code  
Pompano Beach FL 33060

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Pharmerica Account Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.04

Date of Receipt M M / D D / Y Y Y Y  
12 / 14 / 2007

**Transaction ID:** 121407-37

Amount of Each Receipt this Period 11.54

**C.** Full Name (Last, First, Middle Initial)  
Joann Camasso

Mailing Address 15 NE 20th Ave

City State Zip Code  
Pompano Beach FL 33060

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Pharmerica Account Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.04

Date of Receipt M M / D D / Y Y Y Y  
12 / 28 / 2007

**Transaction ID:** 122707-37

Amount of Each Receipt this Period 11.54

**SUBTOTAL** of Receipts This Page (optional) ..... 43.27

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 32  
(check only one)

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

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

**A.**

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

Mailing Address 1213 Augusta Drive

City State Zip Code  
Shelbyville KY 40065

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: 121407-4

Amount of Each Receipt this Period

25.00

**B.**

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

Mailing Address 1213 Augusta Drive

City State Zip Code  
Shelbyville KY 40065

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 122707-3

Amount of Each Receipt this Period

25.00

**C.**

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

Mailing Address 419 Summer Sails Dr

City State Zip Code  
Valrico FL 33594

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

Name of Employer Occupation  
Pharmerica Director, Regional Reimbursement

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 524.94

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: 121407-26

Amount of Each Receipt this Period

20.19

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

70.19

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 32  
(check only one)

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

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

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

Mailing Address 419 Summer Sails Dr

City Valrico State FL Zip Code 33594

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

Name of Employer Pharmerica Occupation Director, Regional Reimbursement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt 12 / 28 / 2007  
**Transaction ID:** 122707-26

Amount of Each Receipt this Period 20.19

**B.** Full Name (Last, First, Middle Initial)  
Todd Dipprey

Mailing Address 1401 7th

City Shallowater State TX Zip Code 79363

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt 12 / 14 / 2007  
**Transaction ID:** 121407-8

Amount of Each Receipt this Period 20.19

**C.** Full Name (Last, First, Middle Initial)  
Todd Dipprey

Mailing Address 1401 7th

City Shallowater State TX Zip Code 79363

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt 12 / 28 / 2007  
**Transaction ID:** 122707-7

Amount of Each Receipt this Period 20.19

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

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

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

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

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

|           |   |                               |   |   |  |
|-----------|---|-------------------------------|---|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Juanita Dong         |                               | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2007   |   |  |
|           | Mailing Address 636 Berridge                                    |                               | <b>Transaction ID:</b> 121407-5   |   |  |
|           | City<br>Ridgeland   | State<br>MS                   | Zip Code<br>39157   | Amount of Each Receipt this Period<br>20.19 |  |
|           | FEC ID number of contributing federal political committee.<br>C |                               |   |   |  |
|           | Name of Employer<br>Pharmerica                                  | Occupation<br>Pharmacist (Nx) | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

Aggregate Year-to-Date ▼  
464.37

|           |   |                               |   |   |  |
|-----------|---|-------------------------------|---|---|--|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Juanita Dong         |                               | Date of Receipt<br>MM / DD / YYYY<br>12 / 28 / 2007   |   |  |
|           | Mailing Address 636 Berridge                                    |                               | <b>Transaction ID:</b> 122707-4   |   |  |
|           | City<br>Ridgeland   | State<br>MS                   | Zip Code<br>39157   | Amount of Each Receipt this Period<br>20.19 |  |
|           | FEC ID number of contributing federal political committee.<br>C |                               |   |   |  |
|           | Name of Employer<br>Pharmerica                                  | Occupation<br>Pharmacist (Nx) | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

Aggregate Year-to-Date ▼  
464.37

|           |   |                               |   |   |  |
|-----------|---|-------------------------------|---|---|--|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Mary Douzjian        |                               | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2007   |   |  |
|           | Mailing Address 910 Santa Florencia                             |                               | <b>Transaction ID:</b> 121407-34  |   |  |
|           | City<br>Solana Beach  | State<br>CA                   | Zip Code<br>92075   | Amount of Each Receipt this Period<br>11.54 |  |
|           | FEC ID number of contributing federal political committee.<br>C |                               |   |   |  |
|           | Name of Employer<br>Pharmerica                                  | Occupation<br>Lead Consultant | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

Aggregate Year-to-Date ▼  
300.04

|  |   |       |
|--|---|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 51.92 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |       |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 32  
(check only one)

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

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

**A.**

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

Mailing Address 910 Santa Florencia

City State Zip Code  
Solana Beach CA 92075

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

Name of Employer Occupation  
Pharmerica Lead Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.04

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 122707-34

Amount of Each Receipt this Period  
11.54

**B.**

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

Mailing Address 12236 Juniper

City State Zip Code  
Overland Park KS 66209

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 121407-14

Amount of Each Receipt this Period  
20.19

**C.**

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

Mailing Address 12236 Juniper

City State Zip Code  
Overland Park KS 66209

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 122707-14

Amount of Each Receipt this Period  
20.19

**SUBTOTAL** of Receipts This Page (optional) ..... ► **51.92**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 32

(check only one)

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

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

**A.**

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

Mailing Address 2011 Frankfort Ave  
#209

City State Zip Code  
Louisville KY 40206

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

Name of Employer Occupation  
PharMerica Vice President, Product Development

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

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: 121407-28

Amount of Each Receipt this Period

50.00

**B.**

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

Mailing Address 2011 Frankfort Ave  
#209

City State Zip Code  
Louisville KY 40206

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

Name of Employer Occupation  
PharMerica Vice President, Product Development

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

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 122707-28

Amount of Each Receipt this Period

50.00

**C.**

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

Mailing Address 9539 Norchester Cir

City State Zip Code  
Tampa FL 33647

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

Name of Employer Occupation  
PharMerica Director, Process Improvement

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: 121407-42

Amount of Each Receipt this Period

25.00

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

125.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 32  
(check only one)

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

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

**A.**

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

Mailing Address 9539 Norchester Cir

City Tampa State FL Zip Code 33647

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

Name of Employer PharMerica Occupation Director, Process Improvement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 28 / 2007  
**Transaction ID:** 122707-42  
 Amount of Each Receipt this Period 25.00

**B.**

Full Name (Last, First, Middle Initial)  
Lee Gregoire

Mailing Address 15350 Pompeii Square

City Colorado Springs State CO Zip Code 80921

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

Name of Employer Pharmacia Occupation Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 14 / 2007  
**Transaction ID:** 121407-11  
 Amount of Each Receipt this Period 10.00

**C.**

Full Name (Last, First, Middle Initial)  
Lee Gregoire

Mailing Address 15350 Pompeii Square

City Colorado Springs State CO Zip Code 80921

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

Name of Employer Pharmacia Occupation Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2007  
**Transaction ID:** 122707-11  
 Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 45.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 32  
(check only one)

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

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

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Thomas Griffin</p> <p>Mailing Address 10903 Ledgement Ln</p> <p>City State Zip Code<br/>Windermere FL 34786</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation<br/>Pharmerica Manager, General</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">650.00</span></p> | <p>Date of Receipt<br/><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br/>12 / 14 / 2007</p> <p><b>Transaction ID:</b> 121407-2</p> <p>Amount of Each Receipt this Period<br/><span style="border: 1px solid black; padding: 2px;">25.00</span></p> |
|---|--|

|   |  |
|---|--|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Thomas Griffin</p> <p>Mailing Address 10903 Ledgement Ln</p> <p>City State Zip Code<br/>Windermere FL 34786</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation<br/>Pharmerica Manager, General</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">650.00</span></p> | <p>Date of Receipt<br/><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br/>12 / 28 / 2007</p> <p><b>Transaction ID:</b> 122707-2</p> <p>Amount of Each Receipt this Period<br/><span style="border: 1px solid black; padding: 2px;">25.00</span></p> |
|---|--|

|  |   |
|--|---|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Pamela Johnson</p> <p>Mailing Address 4021 Audubon Drive</p> <p>City State Zip Code<br/>Largo FL 33771</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation<br/>Pharmerica Manager, General</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">650.00</span></p> | <p>Date of Receipt<br/><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span><br/>12 / 14 / 2007</p> <p><b>Transaction ID:</b> 121407-41</p> <p>Amount of Each Receipt this Period<br/><span style="border: 1px solid black; padding: 2px;">25.00</span></p> |
|--|---|

|  |   |
|--|---|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <span style="border: 1px solid black; padding: 2px;">75.00</span> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <span style="border: 1px solid black; padding: 2px;"> </span>     |



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 32  
(check only one)

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

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

**A.**

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

Mailing Address 4021 Audubon Drive

City State Zip Code  
Largo FL 33771

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 122707-41

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Johnston

Mailing Address 6 Pin Oak Court

City State Zip Code  
West Port CT 06880

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 121407-24

Amount of Each Receipt this Period  
10.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey Johnston

Mailing Address 6 Pin Oak Court

City State Zip Code  
West Port CT 06880

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 122707-24

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 45.00

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

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 18 / 32                 |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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

|   |  |   |   |
|---|--|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>James P. Kilgus |   | Date of Receipt   |
|   | Mailing Address 130 Mason Road                             |   | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/> |
|   | City   | State                                       | Zip Code  |
|   | Brooklyn   | CT  | 06234   |
|   | FEC ID number of contributing federal political committee. |   | <input type="text" value="C"/>  |
| Name of Employer<br>PharMerica  |  | Occupation<br>Director, Clinical Consulting | <b>Transaction ID:</b> 121407-36  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼                    | Amount of Each Receipt this Period  |
|   |  | <input type="text" value="524.94"/>         | <input type="text" value="20.19"/>  |

|   |  |   |   |
|---|--|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>James P. Kilgus |   | Date of Receipt   |
|   | Mailing Address 130 Mason Road                             |   | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/> |
|   | City   | State                                       | Zip Code  |
|   | Brooklyn   | CT  | 06234   |
|   | FEC ID number of contributing federal political committee. |   | <input type="text" value="C"/>  |
| Name of Employer<br>PharMerica  |  | Occupation<br>Director, Clinical Consulting | <b>Transaction ID:</b> 122707-36  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼                    | Amount of Each Receipt this Period  |
|   |  | <input type="text" value="524.94"/>         | <input type="text" value="20.19"/>  |

|   |  |                                     |   |
|---|--|-------------------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Mark Kirasich   |                                     | Date of Receipt   |
|   | Mailing Address 7185 Crystal View Dr Se                    |                                     | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/> |
|   | City   | State                               | Zip Code  |
|   | Caleoonia  | MI                                  | 49316   |
|   | FEC ID number of contributing federal political committee. |                                     | <input type="text" value="C"/>  |
| Name of Employer<br>PharMerica  |  | Occupation<br>Manager, General      | <b>Transaction ID:</b> 121407-27  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼            | Amount of Each Receipt this Period  |
|   |  | <input type="text" value="524.94"/> | <input type="text" value="20.19"/>  |

|  |                                    |
|--|------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="60.57"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>               |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 32

(check only one)

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

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

**A.**

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

Mailing Address 7185 Crystal View Dr Se

City State Zip Code  
Caleoonia MI 49316

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 524.94

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 122707-27

Amount of Each Receipt this Period

20.19

**B.**

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

Mailing Address 2928 Falls

City State Zip Code  
Rapid City SD 57702

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: 121407-12

Amount of Each Receipt this Period

25.00

**C.**

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

Mailing Address 2928 Falls

City State Zip Code  
Rapid City SD 57702

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Transaction ID: 122707-12

Amount of Each Receipt this Period

25.00

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

70.19

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

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

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

FOR LINE NUMBER: PAGE 20 / 32  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Michael Koski  
Mailing Address 1310 Jersey Ave N  
City Golden Valley State MN Zip Code 55427  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PharMerica Occupation Pharmacy Ops Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 546.00  
Date of Receipt 12 / 14 / 2007  
Transaction ID: 121407-10  
Amount of Each Receipt this Period 21.00

**B.** Full Name (Last, First, Middle Initial)  
Michael Koski  
Mailing Address 1310 Jersey Ave N  
City Golden Valley State MN Zip Code 55427  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PharMerica Occupation Pharmacy Ops Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 546.00  
Date of Receipt 12 / 28 / 2007  
Transaction ID: 122707-9  
Amount of Each Receipt this Period 21.00

**C.** Full Name (Last, First, Middle Initial)  
Larry A. Litzmann  
Mailing Address 5617 Skimmer Dr  
City Apollo Beach State FL Zip Code 33572  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PharMerica Occupation Svp, Account Management  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2600.00  
Date of Receipt 12 / 14 / 2007  
Transaction ID: 121407-6  
Amount of Each Receipt this Period 100.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 32  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 5617 Skimmer Dr

City State Zip Code  
Apollo Beach FL 33572

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

Name of Employer Occupation  
PharMerica Svp, Account Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 122707-5

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1014 Northridge Rd

City State Zip Code  
Chaddsford PA 19317

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 121407-33

Amount of Each Receipt this Period  
20.19

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

Mailing Address 1014 Northridge Rd

City State Zip Code  
Chaddsford PA 19317

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 524.94

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 122707-33

Amount of Each Receipt this Period  
20.19

**SUBTOTAL** of Receipts This Page (optional) ..... ► 140.38

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 32  
(check only one)

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

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

**A.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Michael Martin   |                                    | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2007 |
| Mailing Address 4769 Greenview Ct   |                                    | <b>Transaction ID:</b> 121407-29                    |
| City<br>Commerce  | State<br>MI                        | Zip Code<br>48382                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Amount of Each Receipt this Period<br>20.19         |
| Name of Employer<br>PharMerica  | Occupation<br>Manager, General     |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>524.94 |   |

**B.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Michael Martin   |                                    | Date of Receipt<br>MM / DD / YYYY<br>12 / 28 / 2007 |
| Mailing Address 4769 Greenview Ct   |                                    | <b>Transaction ID:</b> 122707-29                    |
| City<br>Commerce  | State<br>MI                        | Zip Code<br>48382                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Amount of Each Receipt this Period<br>20.19         |
| Name of Employer<br>PharMerica  | Occupation<br>Manager, General     |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>524.94 |   |

**C.**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Christopher Novak  |                                     | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2007 |
| Mailing Address 27 Tobisset St  |                                     | <b>Transaction ID:</b> 121407-7                     |
| City<br>Mashpee   | State<br>MA                         | Zip Code<br>02649                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>11.54         |
| Name of Employer<br>PharMerica  | Occupation<br>Consultant Pharmacist |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.04  |   |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 51.92 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |       |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 32  
(check only one)

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

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

**A.**

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

Mailing Address 27 Tobisset St

City Mashpee State MA Zip Code 02649

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 ▼ 300.04

Date of Receipt 12 / 28 / 2007

**Transaction ID:** 122707-6

Amount of Each Receipt this Period 11.54

**B.**

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

Mailing Address 10528 Chestnut Hill

City Fishers State IN Zip Code 46038

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

Name of Employer Pharmerica Occupation Vice President, Ltc Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 14 / 2007

**Transaction ID:** 121407-23

Amount of Each Receipt this Period 40.00

**C.**

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

Mailing Address 10528 Chestnut Hill

City Fishers State IN Zip Code 46038

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

Name of Employer Pharmerica Occupation Vice President, Ltc Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 28 / 2007

**Transaction ID:** 122707-23

Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 91.54

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

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 24 / 32 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Yvonne Preziosi   | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2007 |
|           | Mailing Address 1010 Oak Ridge Manor Dr  | <b>Transaction ID:</b> 121407-44                    |
|           | City State Zip Code<br>Brandon FL 33511  | Amount of Each Receipt this Period<br>11.54         |
|           | FEC ID number of contributing federal political committee. <b>C</b>  |   |
|           | Name of Employer: Pharmerica<br>Occupation: Manager, Paperless Implementation<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>300.04 |   |

|           |  |   |
|-----------|--|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Yvonne Preziosi   | Date of Receipt<br>MM / DD / YYYY<br>12 / 28 / 2007 |
|           | Mailing Address 1010 Oak Ridge Manor Dr  | <b>Transaction ID:</b> 122707-44                    |
|           | City State Zip Code<br>Brandon FL 33511  | Amount of Each Receipt this Period<br>11.54         |
|           | FEC ID number of contributing federal political committee. <b>C</b>  |   |
|           | Name of Employer: Pharmerica<br>Occupation: Manager, Paperless Implementation<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>300.04 |   |

|           |  |   |
|-----------|--|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Larry Reis  | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2007 |
|           | Mailing Address 6036 E. Illinois   | <b>Transaction ID:</b> 121407-20                    |
|           | City State Zip Code<br>Fresno CA 93727   | Amount of Each Receipt this Period<br>20.19         |
|           | FEC ID number of contributing federal political committee. <b>C</b>  |   |
|           | Name of Employer: Pharmerica<br>Occupation: Director, Clinical Consulting<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>524.94 |   |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 43.27 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |       |



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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 25 / 32 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |              |
|   | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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

|   |   |   |   |
|---|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Larry Reis               |   | Date of Receipt   |
|   | Mailing Address 6036 E. Illinois                                    |   | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/> |
|   | City  | State   | Zip Code  |
|   | Fresno  | CA  | 93727   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   | <b>Transaction ID:</b> 122707-20  |
| Name of Employer<br>PharMerica  |   | Occupation<br>Director, Clinical Consulting                     | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br><input type="text" value="524.94"/> | <input type="text" value="20.19"/>  |

|   |   |   |   |
|---|---|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Timothy M. Rowland       |   | Date of Receipt   |
|   | Mailing Address 5952 Jaegerglen Dr                                  |   | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/> |
|   | City  | State   | Zip Code  |
|   | Lithia  | FL  | 33547   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   | <b>Transaction ID:</b> 121407-1   |
| Name of Employer<br>PharMerica  |   | Occupation<br>Director, Operations Support                      | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br><input type="text" value="524.94"/> | <input type="text" value="20.19"/>  |

|   |   |   |   |
|---|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Timothy M. Rowland       |   | Date of Receipt   |
|   | Mailing Address 5952 Jaegerglen Dr                                  |   | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/> |
|   | City  | State   | Zip Code  |
|   | Lithia  | FL  | 33547   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   | <b>Transaction ID:</b> 122707-1   |
| Name of Employer<br>PharMerica  |   | Occupation<br>Director, Operations Support                      | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br><input type="text" value="524.94"/> | <input type="text" value="20.19"/>  |

|  |                                    |
|--|------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="60.57"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>               |

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

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

FOR LINE NUMBER: PAGE 26 / 32  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
David Rushing  
Mailing Address 2212 13th St. SW  
City State Zip Code  
Great Falls MT 59404  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Pharmerica Manager, General  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 524.94  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7  
Transaction ID: 121407-16  
Amount of Each Receipt this Period  
20.19

**B.** Full Name (Last, First, Middle Initial)  
David Rushing  
Mailing Address 2212 13th St. SW  
City State Zip Code  
Great Falls MT 59404  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Pharmerica Manager, General  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 524.94  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7  
Transaction ID: 122707-16  
Amount of Each Receipt this Period  
20.19

**C.** Full Name (Last, First, Middle Initial)  
Paula Ruskan  
Mailing Address 13902 Blue Vista  
City State Zip Code  
Sugar Land TX 77478  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Pharmerica Manager, General  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 504.75  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7  
Transaction ID: 121407-3  
Amount of Each Receipt this Period  
20.19

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 32  
(check only one)

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

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

**A.**

|   |   |   |   |
|---|---|---|---|
| Full Name (Last, First, Middle Initial)<br>Janice Rutkowski   |   | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2007 |   |
| Mailing Address 1110 Abbeys Way   |   | <b>Transaction ID:</b> 121407-9                     |   |
| City Tampa  | State FL  | Zip Code 33602                                      | Amount of Each Receipt this Period<br>76.92 |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   |   |   |
| Name of Employer<br>PharMerica  | Occupation<br>Svp, Clinical Services & Prog Dev |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1999.92             |   |   |

**B.**

|   |   |   |   |
|---|---|---|---|
| Full Name (Last, First, Middle Initial)<br>Janice Rutkowski   |   | Date of Receipt<br>MM / DD / YYYY<br>12 / 28 / 2007 |   |
| Mailing Address 1110 Abbeys Way   |   | <b>Transaction ID:</b> 122707-8                     |   |
| City Tampa  | State FL  | Zip Code 33602                                      | Amount of Each Receipt this Period<br>76.92 |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   |   |   |
| Name of Employer<br>PharMerica  | Occupation<br>Svp, Clinical Services & Prog Dev |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1999.92             |   |   |

**C.**

|   |   |   |   |
|---|---|---|---|
| Full Name (Last, First, Middle Initial)<br>Kari Shanard-Koenders  |   | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2007 |   |
| Mailing Address 3005 Spruceleigh Ct   |   | <b>Transaction ID:</b> 121407-13                    |   |
| City Sioux Falls  | State SD                                      | Zip Code 57105                                      | Amount of Each Receipt this Period<br>20.19 |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   |   |   |
| Name of Employer<br>Pharmerica  | Occupation<br>Utilization Management Director |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>524.94            |   |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>174.03</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

|   |   |                              |                              |                             |
|---|---|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 28 / 32                 |                              |                             |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |

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

|   |   |   |
|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Kari Shanard-Koenders          | Date of Receipt<br>MM / DD / YYYY<br>12 / 28 / 2007 |
|   | Mailing Address 3005 Spruceleigh Ct                                       | <b>Transaction ID:</b> 122707-13                    |
|   | City State Zip Code<br>Sioux Falls SD 57105                               | Amount of Each Receipt this Period<br>20.19         |
|   | FEC ID number of contributing federal political committee.<br>C           |   |
|   | Name of Employer Occupation<br>PharMerica Utilization Management Director |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>524.94  |   |

|   |   |   |
|---|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Elizabeth O. Shanks                  | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2007 |
|   | Mailing Address 1514 Newberger Rd   | <b>Transaction ID:</b> 121407-43                    |
|   | City State Zip Code<br>Lutz FL 33549  | Amount of Each Receipt this Period<br>25.00         |
|   | FEC ID number of contributing federal political committee.<br>C                 |   |
|   | Name of Employer Occupation<br>PharMerica Regional Director, Account Management |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>650.00  |   |

|   |   |   |
|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Elizabeth O. Shanks                  | Date of Receipt<br>MM / DD / YYYY<br>12 / 28 / 2007 |
|   | Mailing Address 1514 Newberger Rd   | <b>Transaction ID:</b> 122707-43                    |
|   | City State Zip Code<br>Lutz FL 33549  | Amount of Each Receipt this Period<br>25.00         |
|   | FEC ID number of contributing federal political committee.<br>C                 |   |
|   | Name of Employer Occupation<br>PharMerica Regional Director, Account Management |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>650.00  |   |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 70.19 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |       |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 32

(check only one)

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

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

|   |   |   |   |
|---|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Wendy Stearns            |   | Date of Receipt   |
|   | Mailing Address 3443 Sunbeam Drive                                  |   | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/> |
|   | City  | State   | Zip Code  |
|   | Sarasota  | FL  | 34240   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   | <b>Transaction ID:</b> 121407-40  |
| Name of Employer<br>Pharmerica  |   | Occupation<br>Director, Clinical Consulting                     | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br><input type="text" value="524.94"/> | <input type="text" value="20.19"/>  |

|   |   |   |   |
|---|---|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Wendy Stearns            |   | Date of Receipt   |
|   | Mailing Address 3443 Sunbeam Drive                                  |   | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/> |
|   | City  | State   | Zip Code  |
|   | Sarasota  | FL  | 34240   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   | <b>Transaction ID:</b> 122707-40  |
| Name of Employer<br>Pharmerica  |   | Occupation<br>Director, Clinical Consulting                     | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br><input type="text" value="524.94"/> | <input type="text" value="20.19"/>  |

|   |   |   |   |
|---|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Alfred Vasquez           |   | Date of Receipt   |
|   | Mailing Address 10548 Madison Brooks Dr                             |   | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/> |
|   | City  | State   | Zip Code  |
|   | Fortville   | IN  | 46040   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   | <b>Transaction ID:</b> 121407-31  |
| Name of Employer<br>Pharmerica  |   | Occupation<br>Manager, General                                  | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br><input type="text" value="390.00"/> | <input type="text" value="15.00"/>  |

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

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

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

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

FOR LINE NUMBER: PAGE 30 / 32  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 10548 Madison  
Brooks Dr

City State Zip Code  
Fortville IN 46040

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 122707-31

Amount of Each Receipt this Period  
15.00

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

Mailing Address 1605 S Dakota Ave

City State Zip Code  
Sioux Falls SD 57105

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** 121407-38

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

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

**Transaction ID:** 122707-38

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **65.00**

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

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 31 / 32                 |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15   | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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

|   |  |   |   |
|---|--|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Cheryl Zinn     |   | Date of Receipt   |
|   | Mailing Address 4008 September Song                        |   | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/> |
|   | City   | State   | Zip Code  |
|   | Manchaca   | TX  | 78652   |
|   | FEC ID number of contributing federal political committee. |   | <input type="text" value="C"/>  |
| Name of Employer<br>Pharmerica  |  | Occupation<br>Manager, General                                  | <b>Transaction ID:</b> 121407-15  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><input type="text" value="524.94"/> | Amount of Each Receipt this Period<br><input type="text" value="20.19"/>                              |

|   |  |   |   |
|---|--|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Cheryl Zinn     |   | Date of Receipt   |
|   | Mailing Address 4008 September Song                        |   | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2007"/> |
|   | City   | State   | Zip Code  |
|   | Manchaca   | TX  | 78652   |
|   | FEC ID number of contributing federal political committee. |   | <input type="text" value="C"/>  |
| Name of Employer<br>Pharmerica  |  | Occupation<br>Manager, General                                  | <b>Transaction ID:</b> 122707-15  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><input type="text" value="524.94"/> | Amount of Each Receipt this Period<br><input type="text" value="20.19"/>                              |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="40.38"/>   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text" value="1904.43"/> |

Image# 28930065388

Form/Schedule: **F3X**

Transaction ID:

\*\*\*\*\*