

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		361852.67
(b) Cash on Hand at Beginning of Reporting Period.....	361852.67	
(c) Total Receipts (from Line 19)	61963.44	61963.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	423816.11	423816.11
7. Total Disbursements (from Line 31).....	20256.90	20256.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	403559.21	403559.21
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	35189.62	35189.62
(ii) Unitemized	20765.29	20765.29
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	55954.91	55954.91
(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)	55954.91	55954.91
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.....	6000.00	6000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	8.53	8.53
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 Transfers (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))..... ▶	61963.44	61963.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	61963.44	61963.44

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	1758.64	1758.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1758.64	1758.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	18498.26	18498.26
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	20256.90	20256.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20256.90	20256.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	55954.91	55954.91
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	55954.91	55954.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	1758.64	1758.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	1758.64	1758.64

**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 6 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS LESLIE ACHTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 821 ALBEMARLE STREET

City WYCKOFF	State NJ	Zip Code 07481
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FEC ID number of contributing federal political committee. **C**

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ANALYTICAL SVCS
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120524

Amount of Each Receipt this Period
50.00

B. MR EDWARD ADAMCIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1021 SUNSET RIDGE

City BRIDGEWATER	State NJ	Zip Code 08807
---------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHARM CONTRACT & CONSULTING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120583

Amount of Each Receipt this Period
76.92

C. MR STEPHEN ADLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 BELLVALE LAKES RD

City WARWICK	State NY	Zip Code 10990
-----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120569

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	176.92
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: (check only one)	PAGE 7 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. DR JODY ALLEN		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>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		0	3		2	0	1	3													
Mailing Address 3031 MOUNT HILL DR		Transaction ID : INCA120612																				
City MIDLOTHIAN	State VA	Zip Code 23113																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF CLINICAL OFFICER																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36																					

Full Name (Last, First, Middle Initial) B. MR JAMES ALLOCCO		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>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		0	3		2	0	1	3													
Mailing Address 19 ROSS ROAD		Transaction ID : INCA120570																				
City SCARSDALE	State NY	Zip Code 10583																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.38																					

Full Name (Last, First, Middle Initial) C. INDERPAL BHANDARI		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>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		0	3		2	0	1	3													
Mailing Address 220 ARDSLEY ROAD		Transaction ID : INCA120586																				
City SCARSDALE	State NY	Zip Code 10583																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00																					

SUBTOTAL of Receipts This Page (optional).....▶	176.92
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: (check only one)	PAGE 8 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR BARRY BOUDREAUX		Date of Receipt
Mailing Address 6527 SHORBURGH DRIVE		M M M / D D D / Y Y Y Y Y Y 01 / 03 / 2013
City	State	Zip Code
INDIANAPOLIS	IN	46278
FEC ID number of contributing federal political committee. C		Transaction ID : INCA120753
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation DIR PHARM PRACTICE		122.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	375.00	

Full Name (Last, First, Middle Initial) B. MR KEVIN BURON		Date of Receipt
Mailing Address 9305 DUCKWOOD TRAIL		M M M / D D D / Y Y Y Y Y Y 01 / 03 / 2013
City	State	Zip Code
WOODBURY	MN	55125
FEC ID number of contributing federal political committee. C		Transaction ID : INCA120638
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation VP/GM SYSTEMED SALES		57.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	461.52	

Full Name (Last, First, Middle Initial) C. MRS DOREEN CALDER		Date of Receipt
Mailing Address 441 S ELM STREET		M M M / D D D / Y Y Y Y Y Y 01 / 03 / 2013
City	State	Zip Code
MAYWOOD	NJ	07607
FEC ID number of contributing federal political committee. C		Transaction ID : INCA120592
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation DIR PRODUCT DEVELOPMENT		40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	320.00	

SUBTOTAL of Receipts This Page (optional).....▶	122.69
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 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS MELISSA CARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BRIARCLIFF TERRACE
 City KINNELON State NJ Zip Code 07405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CHANNEL & GENERIC MKTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120653
 Amount of Each Receipt this Period
 57.69

B. MR DANIEL COLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2901 HIDDEN HILLS WAY
 City CORONA State CA Zip Code 92882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation VP OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120658
 Amount of Each Receipt this Period
 28.00

C. JOHN CORBETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 124 FUHRMAN AVENUE
 City RAMSEY State NJ Zip Code 07446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120732
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.69
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. WARREN DAVIS			Date of Receipt
Mailing Address 3131 SADDLEGAIT COVE			<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA120673
GERMANTOWN	TN	38138	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="76.92"/>
Name of Employer	Occupation		
ACCREDITO HEALTH GROUP	VP STRATEGY & PRODUCT DEV		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="615.36"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR BENJAMIN DIMARCO			Date of Receipt
Mailing Address 4 ANN STREET			<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA120731
VERONA	NJ	07044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	SR ATTORNEY		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="420.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR DANA DUNCAN			Date of Receipt
Mailing Address 125 COMSTOCK TRAIL			<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA120553
EAST HAMPTON	CT	06424	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="475.00"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	SR DIR TECHNOLOGY		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3125.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="601.92"/>
TOTAL 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 11 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR STEPHEN DUNLEAVY

Mailing Address 14026 KNOX STREET

City OVERLAND PARK State KS Zip Code 66221

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP SALES SEGMENT LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 03 / 2013

Transaction ID : INCA120566

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. MR BRAD EPSTEIN

Mailing Address 359 LONG HILL ROAD EAST

City BRIARCLIFF MANOR State NY Zip Code 10510

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CORP COMMUNICATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **461.52**

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 03 / 2013

Transaction ID : INCA120647

Amount of Each Receipt this Period
57.69

Full Name (Last, First, Middle Initial)
C. MR SCOTT ERHARDT

Mailing Address 11540 39TH AVE N

City PLYMOUTH State MN Zip Code 55441

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP ACCT SVCS & ADMIN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 03 / 2013

Transaction ID : INCA120565

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **157.69**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 209
<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR EDWARD FISCHER		Date of Receipt MM / DD / YYYY 01 / 03 / 2013 Transaction ID : INCA120646
Mailing Address 465 OLD STONE RD		Amount of Each Receipt this Period 57.70
City RIDGEWOOD	State NJ	Zip Code 07450
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL PROD INTEGRATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.60	

Full Name (Last, First, Middle Initial) B. MS AMY FOLEY		Date of Receipt MM / DD / YYYY 01 / 03 / 2013 Transaction ID : INCA120654
Mailing Address 4 ROCHAMBEAU ROAD		Amount of Each Receipt this Period 58.00
City POMPTON PLAINS	State NJ	Zip Code 07444
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-COMMERCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 464.00	

Full Name (Last, First, Middle Initial) C. MR JOHN FORD		Date of Receipt MM / DD / YYYY 01 / 03 / 2013 Transaction ID : INCA120748
Mailing Address 6 SILVER LAKE DRIVE		Amount of Each Receipt this Period 15.00
City SHAMONG	State NJ	Zip Code 08088
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	130.70
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 13 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BARNEY GALLASSIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAKEVIEW DR
 City State Zip Code
 OLD TAPPAN NJ 07675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CLIENT RELATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120521
 Amount of Each Receipt this Period
 50.00

B. MR FRANK GENTILELLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 BROOKSHIRE DR
 City State Zip Code
 ROBBINSVILLE NJ 08691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120744
 Amount of Each Receipt this Period
 57.70

C. DARREN GETTINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 CROSSHAVEN CT
 City State Zip Code
 WELDON SPRING MO 63304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP PHARMACY NETWORK MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120590
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.39
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 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR SCOTT GILYARD

Mailing Address 305 BERGAMOT DRIVE

City State Zip Code
 MEDINA MN 55340

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS PRES UHG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013

Transaction ID : INCA120561

Amount of Each Receipt this Period
 57.69

Full Name (Last, First, Middle Initial)
B. MS GINA GRUHN

Mailing Address 13 WEATHER VANE DRIVE

City State Zip Code
 CONVENT STATION NJ 07960

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM ACCOUNT SERVICES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013

Transaction ID : INCA120639

Amount of Each Receipt this Period
 76.92

Full Name (Last, First, Middle Initial)
C. SEAN HART

Mailing Address 4204 W 113TH STREET

City State Zip Code
 LEAWOOD KS 66211

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SVP PROD APPRVL AND COMM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 538.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013

Transaction ID : INCA120644

Amount of Each Receipt this Period
 76.92

SUBTOTAL of Receipts This Page (optional)..... ▶ 211.53

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR GLENN HOFFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 974 HILLCREST ROAD
 City State Zip Code
 RIDGEWOOD NJ 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP FACILITIES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120588
 Amount of Each Receipt this Period
 76.92

B. MR ROGER HOLLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 SAINT RAPHAEL
 City State Zip Code
 LAGUNA NIGUEL CA 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP SALES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 415.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120743
 Amount of Each Receipt this Period
 50.00

C. BRETT HUSELTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 AVONDALE DRIVE
 City State Zip Code
 NORTH WALES PA 19454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP BUSINESS DEVELOPMENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120645
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 176.92
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 16 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. DR SUSAN ITO HOLLANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6366 SW 90TH STREET
 City Gainesville State FL Zip Code 32608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC DIR CLINICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 03 / 2013
Transaction ID : INCA120599
 Amount of Each Receipt this Period 50.00

B. MS MARIANNE JACKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 329 MORRIS AVENUE
 City Mountain Lakes State NJ Zip Code 07046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 03 / 2013
Transaction ID : INCA120511
 Amount of Each Receipt this Period 50.00

C. MS TERESE JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6085 S. PRESTON LANE
 City New Berlin State WI Zip Code 53151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 03 / 2013
Transaction ID : INCA120512
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS MICHELLE JAEGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 14506 MCGINTY ROAD WEST
 City WAYZATA State MN Zip Code 55391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120518
 Amount of Each Receipt this Period
 50.00

B. MR JASON JAMES
 Full Name (Last, First, Middle Initial)
 Mailing Address RR 2 BOX 2036
 City CANADENSIS State PA Zip Code 18325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PHYSICIAN ENGAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120605
 Amount of Each Receipt this Period
 35.00

C. MRS ANNE JOHNSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 S. HARBOUR ISLAND BLVD UNIT 432
 City TAMPA State FL Zip Code 33602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR INFO SERVICE CENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.92

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120625
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 18 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MRS REGINA JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address POST OFFICE BOX 750995
 City LAS VEGAS State NV Zip Code 89136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CUST SVC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120549
 Amount of Each Receipt this Period
 75.00

B. MS KARIN KLEINEGGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 CONKLING TOWN ROAD
 City CHESTER State NY Zip Code 10918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR ACCT MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.92

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120542
 Amount of Each Receipt this Period
 25.00

C. MS KATHLEEN KORDUCKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 WINFIELD DR
 City BOWLING GREEN State OH Zip Code 43402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120513
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS CYNTHIA LAUBACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 KIMBERLY COURT

City	State	Zip Code
ROSEVILLE	CA	95661

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	SR DIR GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **415.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120526

Amount of Each Receipt this Period
50.00

B. PATRICK LINDSAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 RADCLIFF LANE

City	State	Zip Code
LOWER GWYNEDD	PA	19002

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	SVP & GM CAPS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120643

Amount of Each Receipt this Period
76.92

C. MR WILLIAM MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2601 FOX HLL CIRCLE EAST

City	State	Zip Code
GERMANTOWN	TN	38139

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

Name of Employer	Occupation
ACCREDITO HEALTH GROUP	GROUP VP BUS DEV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.44**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120655

Amount of Each Receipt this Period
76.93

SUBTOTAL of Receipts This Page (optional).....▶	203.85
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. DAVID MILLER

Mailing Address 7 CLOVER LANE

City State Zip Code
 RANDOLPH NJ 07869

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP LABOR RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 03 / 2013

Transaction ID : INCA120750

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. MR CRAIG MORRIS

Mailing Address N 49 W 25648 MCKERROW DR

City State Zip Code
 PEWAUKEE WI 53072

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS EXEC DIR CLINICAL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 03 / 2013

Transaction ID : INCA120600

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. DAVID MUZINA MD

Mailing Address 2313 RIVERS EDGE DRIVE

City State Zip Code
 WILLOUGHBY HILLS OH 44094

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP NATIONAL PRACTICE LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 03 / 2013

Transaction ID : INCA120619

Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.69

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR MELVIN OHL		Date of Receipt
Mailing Address 274 E FRANKLIN TPKE		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
RIDGEWOOD	NJ	07450
FEC ID number of contributing federal political committee.		Transaction ID : INCA120651
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="57.70"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP PROCUREMENT & INVENTORY	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="461.60"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR VICTOR PERINI		Date of Receipt
Mailing Address 1466 COUNTRY LAKE ESTATES DRIVE		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
CHESTERFIELD	MO	63005
FEC ID number of contributing federal political committee.		Transaction ID : INCA120637
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="76.92"/>
Name of Employer	Occupation	
ACCREDO HEALTH GROUP	VP INFUSION OPS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="615.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JIMMY PERREN		Date of Receipt
Mailing Address 1250 BRAY PARK DR EAST		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLLIERVILLE	TN	38017
FEC ID number of contributing federal political committee.		Transaction ID : INCA120656
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
ACCREDO HEALTH GROUP	VP REGULATORY COMPLIANCE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="209.62"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR THOMAS PETTYES
 Full Name (Last, First, Middle Initial)
 Mailing Address 8522 UPLAND LN NORTH
 City State Zip Code
 MAPLE GROVE MN 55311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SVP & GENERAL MGR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 615.44

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120649
 Amount of Each Receipt this Period
 76.93

B. MR THOMAS PIERCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10297 E. LAKE DR.
 City State Zip Code
 ENGLEWOOD CO 80111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP LABOR RELATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 415.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120751
 Amount of Each Receipt this Period
 50.00

C. MRS MONICA REED
 Full Name (Last, First, Middle Initial)
 Mailing Address 8475 DUNHAM STATION DRIVE
 City State Zip Code
 TAMPA FL 33647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP PROF PRA
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 616.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120740
 Amount of Each Receipt this Period
 77.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 203.93
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR THOMAS REINCKENS			Date of Receipt
Mailing Address 204 TOKENEKE RD			<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA120597
DARIEN	CT	06820	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="76.92"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	VP PRODUCT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="615.36"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS DONNA ROSEN			Date of Receipt
Mailing Address 7 RED OAK LANE			<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA120575
KINNELON	NJ	07405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	VP OPS-CLINICAL TECH		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. JULIANA RUTH			Date of Receipt
Mailing Address 475 WASHINGTON BLVD 4408N			<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA120608
JERSEY CITY	NJ	07310	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="57.69"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	VP CLIENT SOLUTIONS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="461.52"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="184.61"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR DAVID SCHLETT			Date of Receipt
Mailing Address 339 GRAMERCY PL			M M M / D D D / Y Y Y Y Y Y 01 / 03 / 2013
City	State	Zip Code	Transaction ID : INCA120616
GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	SVP FINANCIAL & ANALYTICAL SVC		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	615.36		

Full Name (Last, First, Middle Initial) B. FRANCIS SCHULTE			Date of Receipt
Mailing Address 5023 SW BERMUDA WAY			M M M / D D D / Y Y Y Y Y Y 01 / 03 / 2013
City	State	Zip Code	Transaction ID : INCA120642
PALM CITY	FL	34990	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		57.50
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	EXEC OPS OFFICER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	460.00		

Full Name (Last, First, Middle Initial) C. MR ALLEN SCHWARTZ			Date of Receipt
Mailing Address 9111 N KARLOV			M M M / D D D / Y Y Y Y Y Y 01 / 03 / 2013
City	State	Zip Code	Transaction ID : INCA120641
SKOKIE	IL	60076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	SR DIR CLINICAL PROD CONSULT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	400.00		

SUBTOTAL of Receipts This Page (optional).....▶	184.42
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JEFFREY SCOTT		Date of Receipt MM / DD / YYYY 01 / 03 / 2013 Transaction ID : INCA120749
Mailing Address 7330 EVEREST LANE - NORTH		Amount of Each Receipt this Period 50.00
City MAPLE GROVE	State MN	Zip Code 55311
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. MS MONICA SCOZZARE		Date of Receipt MM / DD / YYYY 01 / 03 / 2013 Transaction ID : INCA120584
Mailing Address 3021 E MILLCREEK ROAD		Amount of Each Receipt this Period 76.92
City SALT LAKE CITY	State UT	Zip Code 84109
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) C. MR GEORGE SERPIKOV		Date of Receipt MM / DD / YYYY 01 / 03 / 2013 Transaction ID : INCA120759
Mailing Address 66 PROSPECT AVE		Amount of Each Receipt this Period 76.92
City WESTWOOD	State NJ	Zip Code 07675
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS DEV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

SUBTOTAL of Receipts This Page (optional).....▶	203.84
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JOHN SHEA		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td>/</td> <td>03</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	01	/	03	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
01	/	03	/	2013								
Mailing Address 62 FRANKLIN TURNPIKE		Transaction ID : INCA120674										
City ALLENDALE	State NJ	Zip Code 07401										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00											

Full Name (Last, First, Middle Initial) B. WENDELL SHERRELL		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td>/</td> <td>03</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	01	/	03	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
01	/	03	/	2013								
Mailing Address PO BOX 748		Transaction ID : INCA120623										
City COLLIERVILLE	State TN	Zip Code 38027										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00										
Name of Employer ACCREDITO HEALTH GROUP	Occupation DIR ACCDO CORP HR & TALENT MGT											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00											

Full Name (Last, First, Middle Initial) C. ANN SMITH		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td>/</td> <td>03</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	01	/	03	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
01	/	03	/	2013								
Mailing Address 437 GLENDALE RD		Transaction ID : INCA120602										
City WYCKOFF	State NJ	Zip Code 07481										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PUBLIC AFFAIRS											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00											

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 27 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS SUZANNE STREDNAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 WATCHUNG DR
 City State Zip Code
 HAWTHORNE NJ 07506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR CLINICAL SVCS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120735
 Amount of Each Receipt this Period
 50.00

B. MR MARK SULLIVAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 16025 PINE VALE PL.
 City State Zip Code
 MIDLOTHIAN VA 23113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS BUSINESS PROCESS SPECIALIST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120628
 Amount of Each Receipt this Period
 50.00

C. MS MARY THORSBY
 Full Name (Last, First, Middle Initial)
 Mailing Address 17326 ELLEN DR
 City State Zip Code
 LIVONIA MI 48152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR NATL ACCT EXEC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120515
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR JEFFREY TYLER

Mailing Address 37 KNOLL TERRACE

City State Zip Code
 HAZLET NJ 07730

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR TECHNOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 246.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013

Transaction ID : INCA120552

Amount of Each Receipt this Period
 30.77

Full Name (Last, First, Middle Initial)
B. MS CATHERINE WASSON

Mailing Address 3912 CALLE ANDALUCIA

City State Zip Code
 SAN CLEMENTE CA 92673

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP NATL ACCTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013

Transaction ID : INCA120739

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. MR KENNETH WERMES

Mailing Address 26037 N WRANGLER RD

City State Zip Code
 SCOTTSDALE AZ 85255

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SVP & GENERAL MGR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013

Transaction ID : INCA120650

Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.77

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MRS ELISSA WOJTOWICZ RPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 AZALEA PLACE
 City PISCATAWAY State NJ Zip Code 08854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR RRA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120617
 Amount of Each Receipt this Period
 30.00

B. MS JILL ZELMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 43604 EMERALD DUNES PL
 City LEESBURG State VA Zip Code 20176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120543
 Amount of Each Receipt this Period
 50.00

C. MR JAMES ZIRPOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 COPPER COVE CT
 City LOVELAND State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PHARM OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : INCA120746
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BARRY BOUDREAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 6527 SHORBURGH DRIVE

City INDIANAPOLIS	State IN	Zip Code 46278
----------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 10 / 2013
Transaction ID : INCA120999

Amount of Each Receipt this Period
25.00

B. MR JOHN FORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 SILVER LAKE DRIVE

City SHAMONG	State NJ	Zip Code 08088
-----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 10 / 2013
Transaction ID : INCA120994

Amount of Each Receipt this Period
15.00

C. MR JAMES ZIRPOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 COPPER COVE CT

City LOVELAND	State OH	Zip Code 45140
------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARM OPS
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 10 / 2013
Transaction ID : INCA120992

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS LESLIE ACHTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 821 ALBEMARLE STREET

City WYCKOFF	State NJ	Zip Code 07481
-----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ANALYTICAL SVCS
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120777

Amount of Each Receipt this Period
 50.00

B. MR EDWARD ADAMCIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1021 SUNSET RIDGE

City BRIDGEWATER	State NJ	Zip Code 08807
---------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHARM CONTRACT & CONSULTING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120834

Amount of Each Receipt this Period
 76.92

C. MR STEPHEN ADLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 BELLVALE LAKES RD

City WARWICK	State NY	Zip Code 10990
-----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120820

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....	176.92
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 32 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. DR JODY ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3031 MOUNT HILL DR
 City MIDLOTHIAN State VA Zip Code 23113
 Date of Receipt: 01 / 17 / 2013
Transaction ID : INCA120863
 Amount of Each Receipt this Period: 76.92
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: CHIEF CLINICAL OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 615.36

B. MR JAMES ALLOCCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 ROSS ROAD
 City SCARSDALE State NY Zip Code 10583
 Date of Receipt: 01 / 17 / 2013
Transaction ID : INCA120821
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: VP INFO TECHNOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 415.38

C. INDERPAL BHANDARI
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 ARDSLEY ROAD
 City SCARSDALE State NY Zip Code 10583
 Date of Receipt: 01 / 17 / 2013
Transaction ID : INCA120837
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: VP CLINICAL SVCS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 176.92
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: (check only one)	PAGE 33 OF 209
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR BARRY BOUDREAUX		Date of Receipt
Mailing Address 6527 SHORBURGH DRIVE		M M M / D D D / Y Y Y Y Y Y 01 / 17 / 2013
City	State	Zip Code
INDIANAPOLIS	IN	46278
FEC ID number of contributing federal political committee. C		Transaction ID : INCA121000
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation DIR PHARM PRACTICE		122.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00

Full Name (Last, First, Middle Initial) B. MR KEVIN BURON		Date of Receipt
Mailing Address 9305 DUCKWOOD TRAIL		M M M / D D D / Y Y Y Y Y Y 01 / 17 / 2013
City	State	Zip Code
WOODBURY	MN	55125
FEC ID number of contributing federal political committee. C		Transaction ID : INCA120886
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation VP/GM SYSTEMED SALES		57.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 461.52

Full Name (Last, First, Middle Initial) C. MRS DOREEN CALDER		Date of Receipt
Mailing Address 441 S ELM STREET		M M M / D D D / Y Y Y Y Y Y 01 / 17 / 2013
City	State	Zip Code
MAYWOOD	NJ	07607
FEC ID number of contributing federal political committee. C		Transaction ID : INCA120843
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation DIR PRODUCT DEVELOPMENT		40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00

SUBTOTAL of Receipts This Page (optional).....▶	122.69
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS MELISSA CARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BRIARCLIFF TERRACE

City KINNELON	State NJ	Zip Code 07405
------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CHANNEL & GENERIC MKTING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120900

Amount of Each Receipt this Period
 57.69

B. MR DANIEL COLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2901 HIDDEN HILLS WAY

City CORONA	State CA	Zip Code 92882
----------------	-------------	-------------------

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

Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120905

Amount of Each Receipt this Period
 28.00

C. JOHN CORBETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 124 FUHRMAN AVENUE

City RAMSEY	State NJ	Zip Code 07446
----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR ATTORNEY
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 265.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120979

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	110.69
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. WARREN DAVIS		Date of Receipt
Mailing Address 3131 SADDLEGAIT COVE		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
GERMANTOWN	TN	38138
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120920
Name of Employer	Occupation	Amount of Each Receipt this Period
ACCREDO HEALTH GROUP	VP STRATEGY & PRODUCT DEV	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	

Full Name (Last, First, Middle Initial) B. MR BENJAMIN DIMARCO		Date of Receipt
Mailing Address 4 ANN STREET		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
VERONA	NJ	07044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120978
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR ATTORNEY	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="420.00"/>	

Full Name (Last, First, Middle Initial) C. MR DANA DUNCAN		Date of Receipt
Mailing Address 125 COMSTOCK TRAIL		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
EAST HAMPTON	CT	06424
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120805
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR TECHNOLOGY	<input type="text" value="475.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3125.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="601.92"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR STEPHEN DUNLEAVY		Date of Receipt
Mailing Address 14026 KNOX STREET		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
OVERLAND PARK	KS	66221
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120817
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP SALES SEGMENT LEADER	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. MR BRAD EPSTEIN		Date of Receipt
Mailing Address 359 LONG HILL ROAD EAST		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
BRIARCLIFF MANOR	NY	10510
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120895
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP CORP COMMUNICATIONS	<input type="text" value="57.69"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="461.52"/>	

Full Name (Last, First, Middle Initial) C. MR SCOTT ERHARDT		Date of Receipt
Mailing Address 11540 39TH AVE N		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
PLYMOUTH	MN	55441
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120816
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP ACCT SVCS & ADMIN	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="350.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="157.69"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR EDWARD FISCHER		Date of Receipt MM / DD / YYYY 01 / 17 / 2013
Mailing Address 465 OLD STONE RD		Transaction ID : INCA120894
City RIDGEWOOD	State NJ	Zip Code 07450
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 57.70	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL PROD INTEGRATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.60	

Full Name (Last, First, Middle Initial) B. MS AMY FOLEY		Date of Receipt MM / DD / YYYY 01 / 17 / 2013
Mailing Address 4 ROCHAMBEAU ROAD		Transaction ID : INCA120901
City POMPTON PLAINS	State NJ	Zip Code 07444
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 58.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-COMMERCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 464.00	

Full Name (Last, First, Middle Initial) C. MR JOHN FORD		Date of Receipt MM / DD / YYYY 01 / 17 / 2013
Mailing Address 6 SILVER LAKE DRIVE		Transaction ID : INCA120995
City SHAMONG	State NJ	Zip Code 08088
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	130.70
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 38 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BARNEY GALLASSIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAKEVIEW DR
 City State Zip Code
 OLD TAPPAN NJ 07675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CLIENT RELATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120774
 Amount of Each Receipt this Period
 50.00

B. MR FRANK GENTILELLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 BROOKSHIRE DR
 City State Zip Code
 ROBBINSVILLE NJ 08691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.60

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120991
 Amount of Each Receipt this Period
 57.70

C. DARREN GETTINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 CROSSHAVEN CT
 City State Zip Code
 WELDON SPRING MO 63304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP PHARMACY NETWORK MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120841
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.39
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 209
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR SCOTT GILYARD		Date of Receipt MM / DD / YYYY 01 / 17 / 2013 Transaction ID : INCA120812
Mailing Address 305 BERGAMOT DRIVE		Amount of Each Receipt this Period 57.69
City MEDINA	State MN	Zip Code 55340
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES UHG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

Full Name (Last, First, Middle Initial) B. MS GINA GRUHN		Date of Receipt MM / DD / YYYY 01 / 17 / 2013 Transaction ID : INCA120887
Mailing Address 13 WEATHER VANE DRIVE		Amount of Each Receipt this Period 76.92
City CONVENT STATION	State NJ	Zip Code 07960
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM ACCOUNT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) C. SEAN HART		Date of Receipt MM / DD / YYYY 01 / 17 / 2013 Transaction ID : INCA120892
Mailing Address 4204 W 113TH STREET		Amount of Each Receipt this Period 76.92
City LEAWOOD	State KS	Zip Code 66211
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PROD APPRVL AND COMM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 538.44	

SUBTOTAL of Receipts This Page (optional).....▶	211.53
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 40 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR GLENN HOFFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 974 HILLCREST ROAD
 City State Zip Code
 RIDGEWOOD NJ 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP FACILITIES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120839
 Amount of Each Receipt this Period
 76.92

B. MR ROGER HOLLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 SAINT RAPHAEL
 City State Zip Code
 LAGUNA NIGUEL CA 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP SALES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 415.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120990
 Amount of Each Receipt this Period
 50.00

C. BRETT HUSELTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 AVONDALE DRIVE
 City State Zip Code
 NORTH WALES PA 19454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP BUSINESS DEVELOPMENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120893
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 176.92
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: (check only one)	PAGE 41 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. DR SUSAN ITO HOLLANDER		Date of Receipt
Mailing Address 6366 SW 90TH STREET		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
GAINESVILLE	FL	32608
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120850
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	EXEC DIR CLINICAL SVCS	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. MS MARIANNE JACKS		Date of Receipt
Mailing Address 329 MORRIS AVENUE		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
MOUNTAIN LAKES	NJ	07046
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120765
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR NATL ACCT EXEC	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. MS TERESE JACKSON		Date of Receipt
Mailing Address 6085 S. PRESTON LANE		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
NEW BERLIN	WI	53151
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120766
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR NATL ACCT EXEC	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL 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 42 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS MICHELLE JAEGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 14506 MCGINTY ROAD WEST
 City WAYZATA State MN Zip Code 55391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 17 / 2013
Transaction ID : INCA120771
 Amount of Each Receipt this Period 50.00

B. MR JASON JAMES
 Full Name (Last, First, Middle Initial)
 Mailing Address RR 2 BOX 2036
 City CANADENSIS State PA Zip Code 18325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PHYSICIAN ENGAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 01 / 17 / 2013
Transaction ID : INCA120856
 Amount of Each Receipt this Period 35.00

C. MRS ANNE JOHNSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 S. HARBOUR ISLAND BLVD UNIT 432
 City TAMPA State FL Zip Code 33602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR INFO SERVICE CENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.92

Date of Receipt 01 / 17 / 2013
Transaction ID : INCA120873
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 43 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MRS REGINA JONES

Mailing Address POST OFFICE BOX 750995

City LAS VEGAS State NV Zip Code 89136

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CUST SVC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120801

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. MS KARIN KLEINEGGER

Mailing Address 121 CONKLING TOWN ROAD

City CHESTER State NY Zip Code 10918

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR ACCT MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **226.92**

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120795

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. MS KATHLEEN KORDUCKI

Mailing Address 159 WINFIELD DR

City BOWLING GREEN State OH Zip Code 43402

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120767

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS CYNTHIA LAUBACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 KIMBERLY COURT
 City ROSEVILLE State CA Zip Code 95661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.38

Date of Receipt 01 / 17 / 2013
Transaction ID : INCA120779
 Amount of Each Receipt this Period 50.00

B. PATRICK LINDSAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 RADCLIFF LANE
 City LOWER GWYNEDD State PA Zip Code 19002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP & GM CAPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 01 / 17 / 2013
Transaction ID : INCA120891
 Amount of Each Receipt this Period 76.92

C. MR WILLIAM MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2601 FOX HLL CIRCLE EAST
 City GERMANTOWN State TN Zip Code 38139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation GROUP VP BUS DEV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.44

Date of Receipt 01 / 17 / 2013
Transaction ID : INCA120902
 Amount of Each Receipt this Period 76.93

SUBTOTAL of Receipts This Page (optional).....▶	203.85
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. DAVID MILLER

Mailing Address 7 CLOVER LANE

City RANDOLPH State NJ Zip Code 07869

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP LABOR RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120997

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. MR CRAIG MORRIS

Mailing Address N 49 W 25648 MCKERROW DR

City PEWAUKEE State WI Zip Code 53072

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC DIR CLINICAL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120851

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. DAVID MUZINA MD

Mailing Address 2313 RIVERS EDGE DRIVE

City WILLOUGHBY HILLS State OH Zip Code 44094

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP NATIONAL PRACTICE LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **461.52**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120868

Amount of Each Receipt this Period
57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ **157.69**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 209
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR MELVIN OHL		Date of Receipt
Mailing Address 274 E FRANKLIN TPKE		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City State Zip Code RIDGEWOOD NJ 07450		Transaction ID : INCA120899
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="57.70"/>
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROCUREMENT & INVENTORY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="461.60"/>	

Full Name (Last, First, Middle Initial) B. MR VICTOR PERINI		Date of Receipt
Mailing Address 1466 COUNTRY LAKE ESTATES DRIVE		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City State Zip Code CHESTERFIELD MO 63005		Transaction ID : INCA120885
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="76.92"/>
Name of Employer ACCREDITO HEALTH GROUP	Occupation VP INFUSION OPS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="615.36"/>	

Full Name (Last, First, Middle Initial) C. JIMMY PERREN		Date of Receipt
Mailing Address 1250 BRAY PARK DR EAST		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City State Zip Code COLLIERVILLE TN 38017		Transaction ID : INCA120903
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="75.00"/>
Name of Employer ACCREDITO HEALTH GROUP	Occupation VP REGULATORY COMPLIANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="209.62"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 209
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR THOMAS PETTYES
 Full Name (Last, First, Middle Initial)
 Mailing Address 8522 UPLAND LN NORTH

City MAPLE GROVE	State MN	Zip Code 55311
---------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.44**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120897

Amount of Each Receipt this Period
76.93

B. MR THOMAS PIERCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10297 E. LAKE DR.

City ENGLEWOOD	State CO	Zip Code 80111
-------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABOR RELATIONS
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **415.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120998

Amount of Each Receipt this Period
50.00

C. MRS MONICA REED
 Full Name (Last, First, Middle Initial)
 Mailing Address 8475 DUNHAM STATION DRIVE

City TAMPA	State FL	Zip Code 33647
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FEC ID number of contributing federal political committee. **C**

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROF PRA
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **616.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120987

Amount of Each Receipt this Period
77.00

SUBTOTAL of Receipts This Page (optional).....▶	203.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR THOMAS REINCKENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 204 TOKENEKE RD
 City DARIEN State CT Zip Code 06820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PRODUCT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120848
 Amount of Each Receipt this Period
 76.92

B. MS DONNA ROSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 RED OAK LANE
 City KINNELON State NJ Zip Code 07405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP OPS-CLINICAL TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120826
 Amount of Each Receipt this Period
 50.00

C. JULIANA RUTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 475 WASHINGTON BLVD
 4408N
 City JERSEY CITY State NJ Zip Code 07310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CLIENT SOLUTIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120859
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 184.61
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR DAVID SCHLETT

Mailing Address 339 GRAMERCY PL

City State Zip Code
 GLEN ROCK NJ 07452

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SVP FINANCIAL & ANALYTICAL SVC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013

Transaction ID : INCA120866

Amount of Each Receipt this Period
 76.92

Full Name (Last, First, Middle Initial)
B. FRANCIS SCHULTE

Mailing Address 5023 SW BERMUDA WAY

City State Zip Code
 PALM CITY FL 34990

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS EXEC OPS OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013

Transaction ID : INCA120890

Amount of Each Receipt this Period
 57.50

Full Name (Last, First, Middle Initial)
C. MR ALLEN SCHWARTZ

Mailing Address 9111 N KARLOV

City State Zip Code
 SKOKIE IL 60076

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR CLINICAL PROD CONSULT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013

Transaction ID : INCA120889

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 184.42

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 209
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR JEFFREY SCOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 7330 EVEREST LANE - NORTH

City MAPLE GROVE	State MN	Zip Code 55311
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FEC ID number of contributing federal political committee. **C**

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120996

Amount of Each Receipt this Period
50.00

B. MS MONICA SCOZZARE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3021 E MILLCREEK ROAD

City SALT LAKE CITY	State UT	Zip Code 84109
------------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA120835

Amount of Each Receipt this Period
76.92

C. MR GEORGE SERPIKOV
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 PROSPECT AVE

City WESTWOOD	State NJ	Zip Code 07675
------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS DEV
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : INCA121006

Amount of Each Receipt this Period
76.92

SUBTOTAL of Receipts This Page (optional).....	203.84
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 209
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR JOHN SHEA
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 FRANKLIN TURNPIKE
 City ALLENDALE State NJ Zip Code 07401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation ASST COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120921
 Amount of Each Receipt this Period
 40.00

B. WENDELL SHERRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 748
 City COLLIERVILLE State TN Zip Code 38027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation DIR ACCDO CORP HR & TALENT MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120871
 Amount of Each Receipt this Period
 30.00

C. ANN SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 437 GLENDALE RD
 City WYCKOFF State NJ Zip Code 07481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PUBLIC AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120853
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS SUZANNE STREDNAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 WATCHUNG DR
 City HAWTHORNE State NJ Zip Code 07506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR CLINICAL SVCS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120982
 Amount of Each Receipt this Period
50.00

B. MR MARK SULLIVAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 16025 PINE VALE PL.
 City MIDLOTHIAN State VA Zip Code 23113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation BUSINESS PROCESS SPECIALIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120876
 Amount of Each Receipt this Period
50.00

C. MS MARY THORSBY
 Full Name (Last, First, Middle Initial)
 Mailing Address 17326 ELLEN DR
 City LIVONIA State MI Zip Code 48152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120769
 Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JEFFREY TYLER		Date of Receipt
Mailing Address 37 KNOLL TERRACE		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
HAZLET	NJ	07730
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120804
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR TECHNOLOGY	<input type="text" value="30.77"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="246.16"/>	

Full Name (Last, First, Middle Initial) B. MS CATHERINE WASSON		Date of Receipt
Mailing Address 3912 CALLE ANDALUCIA		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
SAN CLEMENTE	CA	92673
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120986
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP NATL ACCTS	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. MR KENNETH WERMES		Date of Receipt
Mailing Address 26037 N WRANGLER RD		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
SCOTTSDALE	AZ	85255
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA120898
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SVP & GENERAL MGR	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="280.77"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MRS ELISSA WOJTOWICZ RPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 AZALEA PLACE

City PISCATAWAY	State NJ	Zip Code 08854
--------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR RRA
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120867

Amount of Each Receipt this Period
 30.00

B. MS JILL ZELMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 43604 EMERALD DUNES PL

City LEESBURG	State VA	Zip Code 20176
------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120796

Amount of Each Receipt this Period
 50.00

C. MR JAMES ZIRPOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 COPPER COVE CT

City LOVELAND	State OH	Zip Code 45140
------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARM OPS
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : INCA120993

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 55 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BARRY BOUDREAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 6527 SHORBURGH DRIVE
 City INDIANAPOLIS State IN Zip Code 46278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PHARM PRACTICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 01 / 24 / 2013
Transaction ID : INCA121239
 Amount of Each Receipt this Period 25.00

B. MR JOHN FORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 SILVER LAKE DRIVE
 City SHAMONG State NJ Zip Code 08088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 24 / 2013
Transaction ID : INCA121234
 Amount of Each Receipt this Period 15.00

C. MR JAMES ZIRPOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 COPPER COVE CT
 City LOVELAND State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PHARM OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 01 / 24 / 2013
Transaction ID : INCA121232
 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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS LESLIE ACHTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 821 ALBEMARLE STREET
 City WYCKOFF State NJ Zip Code 07481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP ANALYTICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121025
 Amount of Each Receipt this Period
 50.00

B. MR EDWARD ADAMCIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1021 SUNSET RIDGE
 City BRIDGEWATER State NJ Zip Code 08807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PHARM CONTRACT & CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121078
 Amount of Each Receipt this Period
 76.92

C. MR STEPHEN ADLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 BELLVALE LAKES RD
 City WARWICK State NY Zip Code 10990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP INFO TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121065
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 176.92
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: (check only one)	PAGE 57 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. DR JODY ALLEN		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013
Mailing Address 3031 MOUNT HILL DR		Transaction ID : INCA121106
City MIDLOTHIAN	State VA	Zip Code 23113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF CLINICAL OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) B. MR JAMES ALLOCCO		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013
Mailing Address 19 ROSS ROAD		Transaction ID : INCA121066
City SCARSDALE	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.38	

Full Name (Last, First, Middle Initial) C. INDERPAL BHANDARI		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013
Mailing Address 220 ARDSLEY ROAD		Transaction ID : INCA121081
City SCARSDALE	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	176.92
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: (check only one)	PAGE 58 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR BARRY BOUDREAUX			Date of Receipt
Mailing Address 6527 SHORBURGH DRIVE			<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA121240
INDIANAPOLIS	IN	46278	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	DIR PHARM PRACTICE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="375.00"/>		

Full Name (Last, First, Middle Initial) B. MR KEVIN BURON			Date of Receipt
Mailing Address 9305 DUCKWOOD TRAIL			<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA121129
WOODBURY	MN	55125	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="57.69"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	VP/GM SYSTEMED SALES		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="461.52"/>		

Full Name (Last, First, Middle Initial) C. MRS DOREEN CALDER			Date of Receipt
Mailing Address 441 S ELM STREET			<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA121087
MAYWOOD	NJ	07607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="40.00"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	DIR PRODUCT DEVELOPMENT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="320.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="122.69"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS MELISSA CARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BRIARCLIFF TERRACE

City KINNELON	State NJ	Zip Code 07405
------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CHANNEL & GENERIC MKTING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 01 / 31 / 2013
Transaction ID : INCA121143

Amount of Each Receipt this Period
 57.69

B. MR DANIEL COLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2901 HIDDEN HILLS WAY

City CORONA	State CA	Zip Code 92882
----------------	-------------	-------------------

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

Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 01 / 31 / 2013
Transaction ID : INCA121148

Amount of Each Receipt this Period
 28.00

C. JOHN CORBETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 124 FUHRMAN AVENUE

City RAMSEY	State NJ	Zip Code 07446
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FEC ID number of contributing federal political committee. **C**

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR ATTORNEY
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 265.38

Date of Receipt
 01 / 31 / 2013
Transaction ID : INCA121219

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	110.69
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. WARREN DAVIS		Date of Receipt
Mailing Address 3131 SADDLEGAIT COVE		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
GERMANTOWN	TN	38138
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121163
Name of Employer	Occupation	Amount of Each Receipt this Period
ACCREDO HEALTH GROUP	VP STRATEGY & PRODUCT DEV	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	

Full Name (Last, First, Middle Initial) B. MR BENJAMIN DIMARCO		Date of Receipt
Mailing Address 4 ANN STREET		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
VERONA	NJ	07044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121218
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR ATTORNEY	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="420.00"/>	

Full Name (Last, First, Middle Initial) C. MR DANA DUNCAN		Date of Receipt
Mailing Address 125 COMSTOCK TRAIL		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
EAST HAMPTON	CT	06424
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121051
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR TECHNOLOGY	<input type="text" value="475.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3125.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="601.92"/>
TOTAL 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 61 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR STEPHEN DUNLEAVY

Mailing Address 14026 KNOX STREET

City State Zip Code
 OVERLAND PARK KS 66221

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP SALES SEGMENT LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : INCA121062

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. MR BRAD EPSTEIN

Mailing Address 359 LONG HILL ROAD EAST

City State Zip Code
 BRIARCLIFF MANOR NY 10510

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CORP COMMUNICATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : INCA121138

Amount of Each Receipt this Period
 57.69

Full Name (Last, First, Middle Initial)
C. MR SCOTT ERHARDT

Mailing Address 11540 39TH AVE N

City State Zip Code
 PLYMOUTH MN 55441

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP ACCT SVCS & ADMIN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : INCA121061

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.69

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR EDWARD FISCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 465 OLD STONE RD
 City RIDGEWOOD State NJ Zip Code 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CLINICAL PROD INTEGRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.60

Date of Receipt 01 / 31 / 2013
Transaction ID : INCA121137
 Amount of Each Receipt this Period 57.70

B. MS AMY FOLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 ROCHAMBEAU ROAD
 City POMPTON PLAINS State NJ Zip Code 07444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP E-COMMERCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 464.00

Date of Receipt 01 / 31 / 2013
Transaction ID : INCA121144
 Amount of Each Receipt this Period 58.00

C. MR JOHN FORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 SILVER LAKE DRIVE
 City SHAMONG State NJ Zip Code 08088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 31 / 2013
Transaction ID : INCA121235
 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional).....▶	130.70
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 63 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BARNEY GALLASSIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAKEVIEW DR
 City State Zip Code
 OLD TAPPAN NJ 07675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CLIENT RELATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121022
 Amount of Each Receipt this Period
 50.00

B. MR FRANK GENTILELLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 BROOKSHIRE DR
 City State Zip Code
 ROBBINSVILLE NJ 08691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121231
 Amount of Each Receipt this Period
 57.70

C. DARREN GETTINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 CROSSHAVEN CT
 City State Zip Code
 WELDON SPRING MO 63304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP PHARMACY NETWORK MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121085
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.39
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR SCOTT GILYARD

Mailing Address 305 BERGAMOT DRIVE

City	State	Zip Code
MEDINA	MN	55340

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	PRES UHG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : INCA121057

Amount of Each Receipt this Period
 57.69

Full Name (Last, First, Middle Initial)
B. MS GINA GRUHN

Mailing Address 13 WEATHER VANE DRIVE

City	State	Zip Code
CONVENT STATION	NJ	07960

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	VP/GM ACCOUNT SERVICES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : INCA121130

Amount of Each Receipt this Period
 76.92

Full Name (Last, First, Middle Initial)
C. SEAN HART

Mailing Address 4204 W 113TH STREET

City	State	Zip Code
LEAWOOD	KS	66211

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	SVP PROD APPRVL AND COMM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 538.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : INCA121135

Amount of Each Receipt this Period
 76.92

SUBTOTAL of Receipts This Page (optional).....	211.53
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR GLENN HOFFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 974 HILLCREST ROAD
 City RIDGEWOOD State NJ Zip Code 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP FACILITIES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121083
 Amount of Each Receipt this Period
 76.92

B. MR ROGER HOLLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 SAINT RAPHAEL
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121230
 Amount of Each Receipt this Period
 50.00

C. BRETT HUSELTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 AVONDALE DRIVE
 City NORTH WALES State PA Zip Code 19454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP BUSINESS DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121136
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 176.92
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: (check only one)	PAGE 66 OF 209
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	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. DR SUSAN ITO HOLLANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6366 SW 90TH STREET
 City Gainesville State FL Zip Code 32608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC DIR CLINICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121094
 Amount of Each Receipt this Period
 50.00

B. MS MARIANNE JACKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 329 MORRIS AVENUE
 City Mountain Lakes State NJ Zip Code 07046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121014
 Amount of Each Receipt this Period
 50.00

C. MS TERESE JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6085 S. PRESTON LANE
 City New Berlin State WI Zip Code 53151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121015
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS MICHELLE JAEGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 14506 MCGINTY ROAD WEST

City WAYZATA	State MN	Zip Code 55391
-----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 31 / 2013

Transaction ID : INCA121019

Amount of Each Receipt this Period
50.00

B. MR JASON JAMES
 Full Name (Last, First, Middle Initial)
 Mailing Address RR 2 BOX 2036

City CANADENSIS	State PA	Zip Code 18325
--------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHYSICIAN ENGAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 31 / 2013

Transaction ID : INCA121099

Amount of Each Receipt this Period
35.00

C. MRS ANNE JOHNSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 S. HARBOUR ISLAND BLVD
 UNIT 432

City TAMPA	State FL	Zip Code 33602
---------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR INFO SERVICE CENTER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **226.92**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 31 / 2013

Transaction ID : INCA121116

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 68 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MRS REGINA JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address POST OFFICE BOX 750995
 City LAS VEGAS State NV Zip Code 89136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CUST SVC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121047
 Amount of Each Receipt this Period
 75.00

B. MS KARIN KLEINEGGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 CONKLING TOWN ROAD
 City CHESTER State NY Zip Code 10918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR ACCT MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.92

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121041
 Amount of Each Receipt this Period
 25.00

C. MS KATHLEEN KORDUCKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 WINFIELD DR
 City BOWLING GREEN State OH Zip Code 43402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121016
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 209
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	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS CYNTHIA LAUBACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 KIMBERLY COURT
 City ROSEVILLE State CA Zip Code 95661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121027
 Amount of Each Receipt this Period
 50.00

B. PATRICK LINDSAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 RADCLIFF LANE
 City LOWER GWYNEDD State PA Zip Code 19002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP & GM CAPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121134
 Amount of Each Receipt this Period
 76.92

C. MR WILLIAM MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2601 FOX HLL CIRCLE EAST
 City GERMANTOWN State TN Zip Code 38139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation GROUP VP BUS DEV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121145
 Amount of Each Receipt this Period
 76.93

SUBTOTAL of Receipts This Page (optional).....▶	203.85
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 70 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. DAVID MILLER

Mailing Address 7 CLOVER LANE

City State Zip Code
 RANDOLPH NJ 07869

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP LABOR RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : INCA121237

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. MR CRAIG MORRIS

Mailing Address N 49 W 25648 MCKERROW DR

City State Zip Code
 PEWAUKEE WI 53072

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS EXEC DIR CLINICAL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : INCA121095

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. DAVID MUZINA MD

Mailing Address 2313 RIVERS EDGE DRIVE

City State Zip Code
 WILLOUGHBY HILLS OH 44094

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP NATIONAL PRACTICE LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : INCA121111

Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.69

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR MELVIN OHL		Date of Receipt
Mailing Address 274 E FRANKLIN TPKE		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
RIDGEWOOD	NJ	07450
FEC ID number of contributing federal political committee.		Transaction ID : INCA121142
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="57.70"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP PROCUREMENT & INVENTORY	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="461.60"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR VICTOR PERINI		Date of Receipt
Mailing Address 1466 COUNTRY LAKE ESTATES DRIVE		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
CHESTERFIELD	MO	63005
FEC ID number of contributing federal political committee.		Transaction ID : INCA121128
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="76.92"/>
Name of Employer	Occupation	
ACCREDO HEALTH GROUP	VP INFUSION OPS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="615.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JIMMY PERREN		Date of Receipt
Mailing Address 1250 BRAY PARK DR EAST		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLLIERVILLE	TN	38017
FEC ID number of contributing federal political committee.		Transaction ID : INCA121146
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
ACCREDO HEALTH GROUP	VP REGULATORY COMPLIANCE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="209.62"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR THOMAS PETTYES		Date of Receipt
Mailing Address 8522 UPLAND LN NORTH		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
MAPLE GROVE	MN	55311
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121140
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SVP & GENERAL MGR	<input type="text" value="76.93"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.44"/>	

Full Name (Last, First, Middle Initial) B. MR THOMAS PIERCE		Date of Receipt
Mailing Address 10297 E. LAKE DR.		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
ENGLEWOOD	CO	80111
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121238
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP LABOR RELATIONS	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="415.38"/>	

Full Name (Last, First, Middle Initial) C. MRS MONICA REED		Date of Receipt
Mailing Address 8475 DUNHAM STATION DRIVE		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
TAMPA	FL	33647
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121227
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP PROF PRA	<input type="text" value="77.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="616.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="203.93"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR THOMAS REINCKENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 204 TOKENEKE RD
 City DARIEN State CT Zip Code 06820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PRODUCT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121092
 Amount of Each Receipt this Period
 76.92

B. MS DONNA ROSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 RED OAK LANE
 City KINNELON State NJ Zip Code 07405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP OPS-CLINICAL TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121071
 Amount of Each Receipt this Period
 50.00

C. JULIANA RUTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 475 WASHINGTON BLVD
 4408N
 City JERSEY CITY State NJ Zip Code 07310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CLIENT SOLUTIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121102
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional).....▶	184.61
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR DAVID SCHLETT			Date of Receipt
Mailing Address 339 GRAMERCY PL			<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA121109
GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="76.92"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	SVP FINANCIAL & ANALYTICAL SVC		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="615.36"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. FRANCIS SCHULTE			Date of Receipt
Mailing Address 5023 SW BERMUDA WAY			<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA121133
PALM CITY	FL	34990	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="57.50"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	EXEC OPS OFFICER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="460.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR ALLEN SCHWARTZ			Date of Receipt
Mailing Address 9111 N KARLOV			<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA121132
SKOKIE	IL	60076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="50.00"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	SR DIR CLINICAL PROD CONSULT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="184.42"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JEFFREY SCOTT		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013
Mailing Address 7330 EVEREST LANE - NORTH		Transaction ID : INCA121236
City MAPLE GROVE	State MN	Zip Code 55311
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. MS MONICA SCOZZARE		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013
Mailing Address 3021 E MILLCREEK ROAD		Transaction ID : INCA121079
City SALT LAKE CITY	State UT	Zip Code 84109
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 76.92	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) C. MR GEORGE SERPIKOV		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013
Mailing Address 66 PROSPECT AVE		Transaction ID : INCA121246
City WESTWOOD	State NJ	Zip Code 07675
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 76.92	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS DEV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

SUBTOTAL of Receipts This Page (optional).....▶	203.84
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JOHN SHEA		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013 Transaction ID : INCA121164
Mailing Address 62 FRANKLIN TURNPIKE		Amount of Each Receipt this Period 40.00
City ALLENDALE	State NJ	Zip Code 07401
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) B. WENDELL SHERRELL		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013 Transaction ID : INCA121114
Mailing Address PO BOX 748		Amount of Each Receipt this Period 30.00
City COLLIERVILLE	State TN	Zip Code 38027
FEC ID number of contributing federal political committee. C		
Name of Employer ACCREDITO HEALTH GROUP	Occupation DIR ACCDO CORP HR & TALENT MGT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. ANN SMITH		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013 Transaction ID : INCA121096
Mailing Address 437 GLENDALE RD		Amount of Each Receipt this Period 50.00
City WYCKOFF	State NJ	Zip Code 07481
FEC ID number of contributing federal political committee. C		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PUBLIC AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 77 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS SUZANNE STREDNAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 WATCHUNG DR
 City State Zip Code
 HAWTHORNE NJ 07506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR CLINICAL SVCS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121222
 Amount of Each Receipt this Period
 50.00

B. MR MARK SULLIVAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 16025 PINE VALE PL.
 City State Zip Code
 MIDLOTHIAN VA 23113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS BUSINESS PROCESS SPECIALIST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121119
 Amount of Each Receipt this Period
 50.00

C. MS MARY THORSBY
 Full Name (Last, First, Middle Initial)
 Mailing Address 17326 ELLEN DR
 City State Zip Code
 LIVONIA MI 48152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR NATL ACCT EXEC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : INCA121017
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR JEFFREY TYLER

Mailing Address 37 KNOLL TERRACE

City HAZLET State NJ Zip Code 07730

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR TECHNOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 246.16

Date of Receipt
 01 / 31 / 2013
Transaction ID : INCA121050

Amount of Each Receipt this Period
 30.77

Full Name (Last, First, Middle Initial)
B. MS CATHERINE WASSON

Mailing Address 3912 CALLE ANDALUCIA

City SAN CLEMENTE State CA Zip Code 92673

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP NATL ACCTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 01 / 31 / 2013
Transaction ID : INCA121226

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. MR KENNETH WERMES

Mailing Address 26037 N WRANGLER RD

City SCOTTSDALE State AZ Zip Code 85255

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP & GENERAL MGR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1600.00

Date of Receipt
 01 / 31 / 2013
Transaction ID : INCA121141

Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.77

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MRS ELISSA WOJTOWICZ RPH		Date of Receipt
Mailing Address 43 AZALEA PLACE		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
PISCATAWAY	NJ	08854
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121110
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR RRA	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. MS JILL ZELMAN		Date of Receipt
Mailing Address 43604 EMERALD DUNES PL		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
LEESBURG	VA	20176
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121042
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP FINANCE	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. MR JAMES ZIRPOLI		Date of Receipt
Mailing Address 654 COPPER COVE CT		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
LOVELAND	OH	45140
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121233
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR PHARM OPS	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="375.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="105.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BARRY BOUDREAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 6527 SHORBURGH DRIVE

City INDIANAPOLIS	State IN	Zip Code 46278
----------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2013
Transaction ID : INCA121470

Amount of Each Receipt this Period
25.00

B. MR JOHN FORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 SILVER LAKE DRIVE

City SHAMONG	State NJ	Zip Code 08088
-----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2013
Transaction ID : INCA121465

Amount of Each Receipt this Period
15.00

C. MR JAMES ZIRPOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 COPPER COVE CT

City LOVELAND	State OH	Zip Code 45140
------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARM OPS
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2013
Transaction ID : INCA121463

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS LESLIE ACHTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 821 ALBEMARLE STREET

City WYCKOFF	State NJ	Zip Code 07481
-----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ANALYTICAL SVCS
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121266

Amount of Each Receipt this Period
 50.00

B. MR EDWARD ADAMCIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1021 SUNSET RIDGE

City BRIDGEWATER	State NJ	Zip Code 08807
---------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHARM CONTRACT & CONSULTING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121316

Amount of Each Receipt this Period
 76.92

C. MR STEPHEN ADLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 BELLVALE LAKES RD

City WARWICK	State NY	Zip Code 10990
-----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121305

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	176.92
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 82 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. DR JODY ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3031 MOUNT HILL DR
 City MIDLOTHIAN State VA Zip Code 23113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation CHIEF CLINICAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121342
 Amount of Each Receipt this Period
 76.92

B. MR JAMES ALLOCCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 ROSS ROAD
 City SCARSDALE State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP INFO TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.38

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121306
 Amount of Each Receipt this Period
 50.00

C. INDERPAL BHANDARI
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 ARDSLEY ROAD
 City SCARSDALE State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CLINICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121319
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 176.92
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 83 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BARRY BOUDREAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 6527 SHORBURGH DRIVE
 City INDIANAPOLIS State IN Zip Code 46278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PHARM PRACTICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121471
 Amount of Each Receipt this Period 25.00

B. MR KEVIN BURON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9305 DUCKWOOD TRAIL
 City WOODBURY State MN Zip Code 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM SYSTEMED SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121365
 Amount of Each Receipt this Period 57.69

C. MRS DOREEN CALDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 441 S ELM STREET
 City MAYWOOD State NJ Zip Code 07607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PRODUCT DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121324
 Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 122.69
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 84 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS MELISSA CARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BRIARCLIFF TERRACE
 City KINNELON State NJ Zip Code 07405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CHANNEL & GENERIC MKTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121379
 Amount of Each Receipt this Period 57.69

B. MR DANIEL COLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2901 HIDDEN HILLS WAY
 City CORONA State CA Zip Code 92882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation VP OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121383
 Amount of Each Receipt this Period 28.00

C. JOHN CORBETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 124 FUHRMAN AVENUE
 City RAMSEY State NJ Zip Code 07446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.38

Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121450
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.69
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 85 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. WARREN DAVIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3131 SADDLEGAIT COVE
 City GERMANTOWN State TN Zip Code 38138
 Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121397
 Amount of Each Receipt this Period 76.92
 FEC ID number of contributing federal political committee. C
 Name of Employer ACCREDO HEALTH GROUP Occupation VP STRATEGY & PRODUCT DEV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

B. MR BENJAMIN DIMARCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 ANN STREET
 City VERONA State NJ Zip Code 07044
 Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121449
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

C. MR DANA DUNCAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 COMSTOCK TRAIL
 City EAST HAMPTON State CT Zip Code 06424
 Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121291
 Amount of Each Receipt this Period 475.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3125.00

SUBTOTAL of Receipts This Page (optional).....▶ 601.92
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: (check only one)	PAGE 86 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR STEPHEN DUNLEAVY
 Full Name (Last, First, Middle Initial)
 Mailing Address 14026 KNOX STREET
 City OVERLAND PARK State KS Zip Code 66221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP SALES SEGMENT LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121302
 Amount of Each Receipt this Period
 50.00

B. MR BRAD EPSTEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 359 LONG HILL ROAD EAST
 City BRIARCLIFF MANOR State NY Zip Code 10510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CORP COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121374
 Amount of Each Receipt this Period
 57.69

C. MR SCOTT ERHARDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 11540 39TH AVE N
 City PLYMOUTH State MN Zip Code 55441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP ACCT SVCS & ADMIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121301
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	157.69
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 87 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR EDWARD FISCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 465 OLD STONE RD
 City RIDGEWOOD State NJ Zip Code 07450
 Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121373
 Amount of Each Receipt this Period 57.70
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CLINICAL PROD INTEGRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.60

B. MS AMY FOLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 ROCHAMBEAU ROAD
 City POMPTON PLAINS State NJ Zip Code 07444
 Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121380
 Amount of Each Receipt this Period 58.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP E-COMMERCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 464.00

C. MR JOHN FORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 SILVER LAKE DRIVE
 City SHAMONG State NJ Zip Code 08088
 Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121466
 Amount of Each Receipt this Period 15.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

SUBTOTAL of Receipts This Page (optional).....▶ 130.70
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BARNEY GALLASSIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAKEVIEW DR
 City OLD TAPPAN State NJ Zip Code 07675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CLIENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121263
 Amount of Each Receipt this Period
 50.00

B. MR FRANK GENTILELLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 BROOKSHIRE DR
 City ROBBINSVILLE State NJ Zip Code 08691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121462
 Amount of Each Receipt this Period
 57.70

C. DARREN GETTINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 CROSSHAVEN CT
 City WELDON SPRING State MO Zip Code 63304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PHARMACY NETWORK MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121322
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional).....▶	165.39
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR SCOTT GILYARD		Date of Receipt
Mailing Address 305 BERGAMOT DRIVE		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
MEDINA	MN	55340
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121297
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	PRES UHG	<input type="text" value="57.69"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="461.52"/>	

Full Name (Last, First, Middle Initial) B. MS GINA GRUHN		Date of Receipt
Mailing Address 13 WEATHER VANE DRIVE		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
CONVENT STATION	NJ	07960
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121366
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP/GM ACCOUNT SERVICES	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	

Full Name (Last, First, Middle Initial) C. SEAN HART		Date of Receipt
Mailing Address 4204 W 113TH STREET		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
LEAWOOD	KS	66211
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121371
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SVP PROD APPRVL AND COMM	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="538.44"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="211.53"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR GLENN HOFFMAN		Date of Receipt
Mailing Address 974 HILLCREST ROAD		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
RIDGEWOOD	NJ	07450
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP FACILITIES	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	
		Transaction ID : INCA121320
		Amount of Each Receipt this Period
		<input type="text" value="76.92"/>

Full Name (Last, First, Middle Initial) B. MR ROGER HOLLAND		Date of Receipt
Mailing Address 41 SAINT RAPHAEL		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
LAGUNA NIGUEL	CA	92677
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP SALES	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="415.38"/>	
		Transaction ID : INCA121461
		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) C. BRETT HUSELTON		Date of Receipt
Mailing Address 120 AVONDALE DRIVE		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
NORTH WALES	PA	19454
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP BUSINESS DEVELOPMENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	
		Transaction ID : INCA121372
		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="176.92"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. DR SUSAN ITO HOLLANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6366 SW 90TH STREET
 City Gainesville State FL Zip Code 32608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC DIR CLINICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121331
 Amount of Each Receipt this Period 50.00

B. MS MARIANNE JACKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 329 MORRIS AVENUE
 City Mountain Lakes State NJ Zip Code 07046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121254
 Amount of Each Receipt this Period 50.00

C. MS TERESE JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6085 S. PRESTON LANE
 City New Berlin State WI Zip Code 53151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 14 / 2013
Transaction ID : INCA121255
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS MICHELLE JAEGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 14506 MCGINTY ROAD WEST

City WAYZATA	State MN	Zip Code 55391
-----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 14 / 2013

Transaction ID : INCA121260

Amount of Each Receipt this Period
50.00

B. MR JASON JAMES
 Full Name (Last, First, Middle Initial)
 Mailing Address RR 2 BOX 2036

City CANADENSIS	State PA	Zip Code 18325
--------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHYSICIAN ENGAGEMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 14 / 2013

Transaction ID : INCA121336

Amount of Each Receipt this Period
35.00

C. MRS ANNE JOHNSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 S. HARBOUR ISLAND BLVD
 UNIT 432

City TAMPA	State FL	Zip Code 33602
---------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR INFO SERVICE CENTER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **226.92**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 14 / 2013

Transaction ID : INCA121352

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 93 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MRS REGINA JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address POST OFFICE BOX 750995
 City LAS VEGAS State NV Zip Code 89136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CUST SVC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121287
 Amount of Each Receipt this Period
 75.00

B. MS KARIN KLEINEGGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 CONKLING TOWN ROAD
 City CHESTER State NY Zip Code 10918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR ACCT MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.92

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121281
 Amount of Each Receipt this Period
 25.00

C. MS KATHLEEN KORDUCKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 WINFIELD DR
 City BOWLING GREEN State OH Zip Code 43402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121256
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 94 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS CYNTHIA LAUBACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 KIMBERLY COURT
 City ROSEVILLE State CA Zip Code 95661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121268
 Amount of Each Receipt this Period
 50.00

B. PATRICK LINDSAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 RADCLIFF LANE
 City LOWER GWYNEDD State PA Zip Code 19002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP & GM CAPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121370
 Amount of Each Receipt this Period
 76.92

C. MR WILLIAM MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2601 FOX HLL CIRCLE EAST
 City GERMANTOWN State TN Zip Code 38139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation GROUP VP BUS DEV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.44

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121381
 Amount of Each Receipt this Period
 76.93

SUBTOTAL of Receipts This Page (optional)..... ▶ 203.85
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 209
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	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. DAVID MILLER

Mailing Address 7 CLOVER LANE

City RANDOLPH State NJ Zip Code 07869

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP LABOR RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
02 / 14 / 2013

Transaction ID : INCA121468

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. MR CRAIG MORRIS

Mailing Address N 49 W 25648 MCKERROW DR

City PEWAUKEE State WI Zip Code 53072

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC DIR CLINICAL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
02 / 14 / 2013

Transaction ID : INCA121332

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. DAVID MUZINA MD

Mailing Address 2313 RIVERS EDGE DRIVE

City WILLOUGHBY HILLS State OH Zip Code 44094

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP NATIONAL PRACTICE LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **461.52**

Date of Receipt
 M M / D D / Y Y Y Y Y
02 / 14 / 2013

Transaction ID : INCA121347

Amount of Each Receipt this Period
57.69

SUBTOTAL of Receipts This Page (optional)..... **157.69**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR MELVIN OHL			Date of Receipt
Mailing Address 274 E FRANKLIN TPKE			M M M / D D D / Y Y Y Y Y Y 02 / 14 / 2013
City	State	Zip Code	Transaction ID : INCA121378
RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		57.70
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	VP PROCUREMENT & INVENTORY		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			461.60
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR VICTOR PERINI			Date of Receipt
Mailing Address 1466 COUNTRY LAKE ESTATES DRIVE			M M M / D D D / Y Y Y Y Y Y 02 / 14 / 2013
City	State	Zip Code	Transaction ID : INCA121364
CHESTERFIELD	MO	63005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
Name of Employer	Occupation		
ACCREDO HEALTH GROUP	VP INFUSION OPS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			615.36
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR THOMAS PETTYES			Date of Receipt
Mailing Address 8522 UPLAND LN NORTH			M M M / D D D / Y Y Y Y Y Y 02 / 14 / 2013
City	State	Zip Code	Transaction ID : INCA121376
MAPLE GROVE	MN	55311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.93
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	SVP & GENERAL MGR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			615.44
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	211.55
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR THOMAS PIERCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10297 E. LAKE DR.
 City ENGLEWOOD State CO Zip Code 80111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP LABOR RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **415.38**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121469
 Amount of Each Receipt this Period
50.00

B. MRS MONICA REED
 Full Name (Last, First, Middle Initial)
 Mailing Address 8475 DUNHAM STATION DRIVE
 City TAMPA State FL Zip Code 33647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PROF PRA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **616.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121458
 Amount of Each Receipt this Period
77.00

C. MR THOMAS REINCKENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 204 TOKENEKE RD
 City DARIEN State CT Zip Code 06820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PRODUCT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121329
 Amount of Each Receipt this Period
76.92

SUBTOTAL of Receipts This Page (optional).....▶	203.92
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: (check only one)	PAGE 98 OF 209
<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS DONNA ROSEN		Date of Receipt MM / DD / YYYY 02 / 14 / 2013
Mailing Address 7 RED OAK LANE		Transaction ID : INCA121309
City KINNELON	State NJ	Zip Code 07405
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS-CLINICAL TECH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. JULIANA RUTH		Date of Receipt MM / DD / YYYY 02 / 14 / 2013
Mailing Address 475 WASHINGTON BLVD 4408N		Transaction ID : INCA121338
City JERSEY CITY	State NJ	Zip Code 07310
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 57.69	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIENT SOLUTIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

Full Name (Last, First, Middle Initial) C. MR DAVID SCHLETT		Date of Receipt MM / DD / YYYY 02 / 14 / 2013
Mailing Address 339 GRAMERCY PL		Transaction ID : INCA121345
City GLEN ROCK	State NJ	Zip Code 07452
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 76.92	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCIAL & ANALYTICAL SVC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

SUBTOTAL of Receipts This Page (optional).....▶	184.61
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 OF 209
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. FRANCIS SCHULTE

Mailing Address 5023 SW BERMUDA WAY

City PALM CITY State FL Zip Code 34990

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC OPS OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt
02 / 14 / 2013

Transaction ID : INCA121369

Amount of Each Receipt this Period
57.50

Full Name (Last, First, Middle Initial)
B. MR ALLEN SCHWARTZ

Mailing Address 9111 N KARLOV

City SKOKIE State IL Zip Code 60076

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR CLINICAL PROD CONSULT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
02 / 14 / 2013

Transaction ID : INCA121368

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. MR JEFFREY SCOTT

Mailing Address 7330 EVEREST LANE - NORTH

City MAPLE GROVE State MN Zip Code 55311

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
02 / 14 / 2013

Transaction ID : INCA121467

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **157.50**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 100 OF 209
<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS MONICA SCOZZARE		Date of Receipt
Mailing Address 3021 E MILLCREEK ROAD		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
SALT LAKE CITY	UT	84109
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121317
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP CLINICAL SVCS	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	

Full Name (Last, First, Middle Initial) B. MR GEORGE SERPIKOV		Date of Receipt
Mailing Address 66 PROSPECT AVE		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
WESTWOOD	NJ	07675
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121477
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP BUSINESS DEV	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	

Full Name (Last, First, Middle Initial) C. MR JOHN SHEA		Date of Receipt
Mailing Address 62 FRANKLIN TURNPIKE		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
ALLENDALE	NJ	07401
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121398
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	ASST COUNSEL	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="320.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="193.84"/>
TOTAL 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 101 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. WENDELL SHERRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 748
 City COLLIERVILLE State TN Zip Code 38027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation DIR ACCDO CORP HR & TALENT MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121350
 Amount of Each Receipt this Period
 30.00

B. ANN SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 437 GLENDALE RD
 City WYCKOFF State NJ Zip Code 07481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PUBLIC AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121333
 Amount of Each Receipt this Period
 50.00

C. MS SUZANNE STREDNAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 WATCHUNG DR
 City HAWTHORNE State NJ Zip Code 07506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR CLINICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121453
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR MARK SULLIVAN		Date of Receipt MM / DD / YYYY 02 / 14 / 2013
Mailing Address 16025 PINE VALE PL.		Transaction ID : INCA121355
City MIDLOTHIAN	State VA	Zip Code 23113
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS PROCESS SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. MS MARY THORSBY		Date of Receipt MM / DD / YYYY 02 / 14 / 2013
Mailing Address 17326 ELLEN DR		Transaction ID : INCA121258
City LIVONIA	State MI	Zip Code 48152
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) C. MR JEFFREY TYLER		Date of Receipt MM / DD / YYYY 02 / 14 / 2013
Mailing Address 37 KNOLL TERRACE		Transaction ID : INCA121290
City HAZLET	State NJ	Zip Code 07730
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.77	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.16	

SUBTOTAL of Receipts This Page (optional).....▶	180.77
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 103 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS CATHERINE WASSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3912 CALLE ANDALUCIA
 City SAN CLEMENTE State CA Zip Code 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP NATL ACCTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121457
 Amount of Each Receipt this Period
 50.00

B. MR KENNETH WERMES
 Full Name (Last, First, Middle Initial)
 Mailing Address 26037 N WRANGLER RD
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP & GENERAL MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121377
 Amount of Each Receipt this Period
 200.00

C. MRS ELISSA WOJTOWICZ RPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 AZALEA PLACE
 City PISCATAWAY State NJ Zip Code 08854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR RRA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121346
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS JILL ZELMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 43604 EMERALD DUNES PL
 City LEESBURG State VA Zip Code 20176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121282
 Amount of Each Receipt this Period
 50.00

B. MR JAMES ZIRPOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 COPPER COVE CT
 City LOVELAND State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PHARM OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2013
Transaction ID : INCA121464
 Amount of Each Receipt this Period
 25.00

C. MR BARRY BOUDREAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 6527 SHORBURGH DRIVE
 City INDIANAPOLIS State IN Zip Code 46278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PHARM PRACTICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2013
Transaction ID : INCA121698
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JOHN FORD		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td>/</td> <td>21</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	02	/	21	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
02	/	21	/	2013								
Mailing Address 6 SILVER LAKE DRIVE		Transaction ID : INCA121693										
City SHAMONG	State NJ	Zip Code 08088										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00											
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00											

Full Name (Last, First, Middle Initial) B. MR JAMES ZIRPOLI		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td>/</td> <td>21</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	02	/	21	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
02	/	21	/	2013								
Mailing Address 654 COPPER COVE CT		Transaction ID : INCA121691										
City LOVELAND	State OH	Zip Code 45140										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00											
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARM OPS											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00											

Full Name (Last, First, Middle Initial) C. MS LESLIE ACHTER		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td>/</td> <td>28</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	02	/	28	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
02	/	28	/	2013								
Mailing Address 821 ALBEMARLE STREET		Transaction ID : INCA121500										
City WYCKOFF	State NJ	Zip Code 07481										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00											
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ANALYTICAL SVCS											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00											

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR EDWARD ADAMCIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1021 SUNSET RIDGE
 City BRIDGEWATER State NJ Zip Code 08807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PHARM CONTRACT & CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121549
 Amount of Each Receipt this Period 76.92

B. MR STEPHEN ADLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 BELLVALE LAKES RD
 City WARWICK State NY Zip Code 10990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP INFO TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121538
 Amount of Each Receipt this Period 50.00

C. DR JODY ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3031 MOUNT HILL DR
 City MIDLOTHIAN State VA Zip Code 23113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation CHIEF CLINICAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121574
 Amount of Each Receipt this Period 76.92

SUBTOTAL of Receipts This Page (optional)..... ▶ 203.84
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JAMES ALLOCCO		Date of Receipt
Mailing Address 19 ROSS ROAD		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City SCARSDALE	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA121539
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation VP INFO TECHNOLOGY		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="415.38"/>		

Full Name (Last, First, Middle Initial) B. INDERPAL BHANDARI		Date of Receipt
Mailing Address 220 ARDSLEY ROAD		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City SCARSDALE	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA121551
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation VP CLINICAL SVCS		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="400.00"/>		

Full Name (Last, First, Middle Initial) C. MR BARRY BOUDREAUX		Date of Receipt
Mailing Address 6527 SHORBURGH DRIVE		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City INDIANAPOLIS	State IN	Zip Code 46278
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA121699
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation DIR PHARM PRACTICE		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="375.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="125.00"/>
TOTAL 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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR KEVIN BURON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9305 DUCKWOOD TRAIL
 City State Zip Code
 WOODBURY MN 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM SYSTEMED SALES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121596
 Amount of Each Receipt this Period
 57.69

B. MRS DOREEN CALDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 441 S ELM STREET
 City State Zip Code
 MAYWOOD NJ 07607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR PRODUCT DEVELOPMENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121556
 Amount of Each Receipt this Period
 40.00

C. MS MELISSA CARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BRIARCLIFF TERRACE
 City State Zip Code
 KINNELON NJ 07405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CHANNEL & GENERIC MKTING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121610
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.38
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 109 OF 209
<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR DANIEL COLE		Date of Receipt
Mailing Address 2901 HIDDEN HILLS WAY		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
CORONA	CA	92882
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121613
Name of Employer	Occupation	Amount of Each Receipt this Period
ACCREDITO HEALTH GROUP	VP OPS	<input type="text" value="28.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="224.00"/>	

Full Name (Last, First, Middle Initial) B. JOHN CORBETT		Date of Receipt
Mailing Address 124 FUHRMAN AVENUE		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
RAMSEY	NJ	07446
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121679
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR ATTORNEY	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="265.38"/>	

Full Name (Last, First, Middle Initial) C. WARREN DAVIS		Date of Receipt
Mailing Address 3131 SADDLEGAIT COVE		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
GERMANTOWN	TN	38138
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121626
Name of Employer	Occupation	Amount of Each Receipt this Period
ACCREDITO HEALTH GROUP	VP STRATEGY & PRODUCT DEV	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="129.92"/>
TOTAL 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 110 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BENJAMIN DIMARCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 ANN STREET
 City VERONA State NJ Zip Code 07044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121678
 Amount of Each Receipt this Period
 50.00

B. MR DANA DUNCAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 COMSTOCK TRAIL
 City EAST HAMPTON State CT Zip Code 06424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121525
 Amount of Each Receipt this Period
 475.00

C. MR STEPHEN DUNLEAVY
 Full Name (Last, First, Middle Initial)
 Mailing Address 14026 KNOX STREET
 City OVERLAND PARK State KS Zip Code 66221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP SALES SEGMENT LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121535
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 111 OF 209
<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BRAD EPSTEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 359 LONG HILL ROAD EAST
 City State Zip Code
 BRIARCLIFF MANOR NY 10510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CORP COMMUNICATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121605
 Amount of Each Receipt this Period
 57.69

B. MR SCOTT ERHARDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 11540 39TH AVE N
 City State Zip Code
 PLYMOUTH MN 55441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP ACCT SVCS & ADMIN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121534
 Amount of Each Receipt this Period
 50.00

C. MR EDWARD FISCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 465 OLD STONE RD
 City State Zip Code
 RIDGEWOOD NJ 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CLINICAL PROD INTEGRATION
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121604
 Amount of Each Receipt this Period
 57.70

SUBTOTAL of Receipts This Page (optional).....▶	165.39
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 112 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS AMY FOLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 ROCHAMBEAU ROAD
 City State Zip Code
 POMPTON PLAINS NJ 07444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP E-COMMERCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 464.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121611
 Amount of Each Receipt this Period
 58.00

B. MR JOHN FORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 SILVER LAKE DRIVE
 City State Zip Code
 SHAMONG NJ 08088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121694
 Amount of Each Receipt this Period
 15.00

C. MR BARNEY GALLASSIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAKEVIEW DR
 City State Zip Code
 OLD TAPPAN NJ 07675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CLIENT RELATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121497
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 123.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR FRANK GENTILELLA		Date of Receipt
Mailing Address 20 BROOKSHIRE DR		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
ROBBINSVILLE	NJ	08691
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA121690
MEDCO HEALTH SOLUTIONS	VP/GM	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="461.60"/>	<input type="text" value="57.70"/>

Full Name (Last, First, Middle Initial) B. DARREN GETTINGS		Date of Receipt
Mailing Address 4600 CROSSHAVEN CT		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
WELDON SPRING	MO	63304
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA121554
MEDCO HEALTH SOLUTIONS	VP PHARMACY NETWORK MGMT	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="461.52"/>	<input type="text" value="57.69"/>

Full Name (Last, First, Middle Initial) C. MR SCOTT GILYARD		Date of Receipt
Mailing Address 305 BERGAMOT DRIVE		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
MEDINA	MN	55340
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA121531
MEDCO HEALTH SOLUTIONS	PRES UHG	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="461.52"/>	<input type="text" value="57.69"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="173.08"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS GINA GRUHN		Date of Receipt
Mailing Address 13 WEATHER VANE DRIVE		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
CONVENT STATION	NJ	07960
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121597
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP/GM ACCOUNT SERVICES	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	

Full Name (Last, First, Middle Initial) B. SEAN HART		Date of Receipt
Mailing Address 4204 W 113TH STREET		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
LEAWOOD	KS	66211
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121602
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SVP PROD APPRVL AND COMM	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="538.44"/>	

Full Name (Last, First, Middle Initial) C. MR GLENN HOFFMAN		Date of Receipt
Mailing Address 974 HILLCREST ROAD		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
RIDGEWOOD	NJ	07450
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121552
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP FACILITIES	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="230.76"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR ROGER HOLLAND		Date of Receipt
Mailing Address 41 SAINT RAPHAEL		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
LAGUNA NIGUEL	CA	92677
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121689
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP SALES	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="415.38"/>	

Full Name (Last, First, Middle Initial) B. BRETT HUSELTON		Date of Receipt
Mailing Address 120 AVONDALE DRIVE		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
NORTH WALES	PA	19454
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121603
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP BUSINESS DEVELOPMENT	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. DR SUSAN ITO HOLLANDER		Date of Receipt
Mailing Address 6366 SW 90TH STREET		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
GAINESVILLE	FL	32608
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121563
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	EXEC DIR CLINICAL SVCS	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL 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 116 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS MARIANNE JACKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 329 MORRIS AVENUE
 City MOUNTAIN LAKES State NJ Zip Code 07046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121488
 Amount of Each Receipt this Period 50.00

B. MS TERESE JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6085 S. PRESTON LANE
 City NEW BERLIN State WI Zip Code 53151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121489
 Amount of Each Receipt this Period 50.00

C. MS MICHELLE JAEGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 14506 MCGINTY ROAD WEST
 City WAYZATA State MN Zip Code 55391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121494
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JASON JAMES		Date of Receipt
Mailing Address RR 2 BOX 2036		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
CANADENSIS	PA	18325
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA121568
MEDCO HEALTH SOLUTIONS	DIR PHYSICIAN ENGAGEMENT	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="280.00"/>	<input type="text" value="35.00"/>

Full Name (Last, First, Middle Initial) B. MRS ANNE JOHNSTON		Date of Receipt
Mailing Address 700 S. HARBOUR ISLAND BLVD UNIT 432		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
TAMPA	FL	33602
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA121584
MEDCO HEALTH SOLUTIONS	SR DIR INFO SERVICE CENTER	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="226.92"/>	<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) C. MRS REGINA JONES		Date of Receipt
Mailing Address POST OFFICE BOX 750995		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
LAS VEGAS	NV	89136
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA121521
MEDCO HEALTH SOLUTIONS	VP CUST SVC	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="135.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS KARIN KLEINEGGER		Date of Receipt
Mailing Address 121 CONKLING TOWN ROAD		M M M / D D D / Y Y Y Y Y Y 02 / 28 / 2013
City	State	Zip Code
CHESTER	NY	10918
FEC ID number of contributing federal political committee.		Transaction ID : INCA121515
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		125.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR DIR ACCT MGMT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	226.92	

Full Name (Last, First, Middle Initial) B. MS KATHLEEN KORDUCKI		Date of Receipt
Mailing Address 159 WINFIELD DR		M M M / D D D / Y Y Y Y Y Y 02 / 28 / 2013
City	State	Zip Code
BOWLING GREEN	OH	43402
FEC ID number of contributing federal political committee.		Transaction ID : INCA121490
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR NATL ACCT EXEC	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	400.00	

Full Name (Last, First, Middle Initial) C. MS CYNTHIA LAUBACHER		Date of Receipt
Mailing Address 1100 KIMBERLY COURT		M M M / D D D / Y Y Y Y Y Y 02 / 28 / 2013
City	State	Zip Code
ROSEVILLE	CA	95661
FEC ID number of contributing federal political committee.		Transaction ID : INCA121502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR DIR GOVERNMENT AFFAIRS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	415.38	

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: (check only one)	PAGE 119 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. PATRICK LINDSAY			Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 1001 RADCLIFF LANE			Transaction ID : INCA121601
City LOWER GWYNEDD	State PA	Zip Code 19002	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. C			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GM CAPS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36		

Full Name (Last, First, Middle Initial) B. MR WILLIAM MARTIN			Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 2601 FOX HLL CIRCLE EAST			Transaction ID : INCA121612
City GERMANTOWN	State TN	Zip Code 38139	Amount of Each Receipt this Period 76.93
FEC ID number of contributing federal political committee. C			
Name of Employer ACCREDO HEALTH GROUP	Occupation GROUP VP BUS DEV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.44		

Full Name (Last, First, Middle Initial) C. DAVID MILLER			Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 7 CLOVER LANE			Transaction ID : INCA121696
City RANDOLPH	State NJ	Zip Code 07869	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABOR RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional).....▶	203.85
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 120 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR CRAIG MORRIS

Mailing Address **N 49 W 25648 MCKERROW DR**

City State Zip Code
PEWAUKEE WI 53072

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

Name of Employer Occupation
MEDCO HEALTH SOLUTIONS EXEC DIR CLINICAL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
02 / 28 / 2013

Transaction ID : INCA121564

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. DAVID MUZINA MD

Mailing Address **2313 RIVERS EDGE DRIVE**

City State Zip Code
WILLOUGHBY HILLS OH 44094

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

Name of Employer Occupation
MEDCO HEALTH SOLUTIONS VP NATIONAL PRACTICE LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
461.52

Date of Receipt
02 / 28 / 2013

Transaction ID : INCA121579

Amount of Each Receipt this Period
57.69

Full Name (Last, First, Middle Initial)
C. MR MELVIN OHL

Mailing Address **274 E FRANKLIN TPKE**

City State Zip Code
RIDGEWOOD NJ 07450

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

Name of Employer Occupation
MEDCO HEALTH SOLUTIONS VP PROCUREMENT & INVENTORY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
461.60

Date of Receipt
02 / 28 / 2013

Transaction ID : INCA121609

Amount of Each Receipt this Period
57.70

SUBTOTAL of Receipts This Page (optional)..... ▶ **165.39**

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 121 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR VICTOR PERINI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1466 COUNTRY LAKE ESTATES DRIVE
 City CHESTERFIELD State MO Zip Code 63005
 Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121595
 Amount of Each Receipt this Period 76.92
 FEC ID number of contributing federal political committee. C
 Name of Employer ACCREDO HEALTH GROUP Occupation VP INFUSION OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 615.36

B. MR THOMAS PETTYES
 Full Name (Last, First, Middle Initial)
 Mailing Address 8522 UPLAND LN NORTH
 City MAPLE GROVE State MN Zip Code 55311
 Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121607
 Amount of Each Receipt this Period 76.93
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP & GENERAL MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 615.44

C. MR THOMAS PIERCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10297 E. LAKE DR.
 City ENGLEWOOD State CO Zip Code 80111
 Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121697
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP LABOR RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 415.38

SUBTOTAL of Receipts This Page (optional)..... ▶ 203.85
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MRS MONICA REED			Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 8475 DUNHAM STATION DRIVE			Transaction ID : INCA121686
City TAMPA	State FL	Zip Code 33647	Amount of Each Receipt this Period 77.00
FEC ID number of contributing federal political committee. C			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROF PRA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 616.00		

Full Name (Last, First, Middle Initial) B. MR THOMAS REINCKENS			Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 204 TOKENEKE RD			Transaction ID : INCA121561
City DARIEN	State CT	Zip Code 06820	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. C			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRODUCT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36		

Full Name (Last, First, Middle Initial) C. MS DONNA ROSEN			Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 7 RED OAK LANE			Transaction ID : INCA121542
City KINNELON	State NJ	Zip Code 07405	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS-CLINICAL TECH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional).....▶	203.92
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: (check only one)	PAGE 123 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. JULIANA RUTH		Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 475 WASHINGTON BLVD 4408N		Transaction ID : INCA121570
City JERSEY CITY	State NJ	Zip Code 07310
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIENT SOLUTIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

Full Name (Last, First, Middle Initial) B. MR DAVID SCHLETT		Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 339 GRAMERCY PL		Transaction ID : INCA121577
City GLEN ROCK	State NJ	Zip Code 07452
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCIAL & ANALYTICAL SVC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) C. FRANCIS SCHULTE		Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 5023 SW BERMUDA WAY		Transaction ID : INCA121600
City PALM CITY	State FL	Zip Code 34990
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC OPS OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

SUBTOTAL of Receipts This Page (optional).....▶	192.11
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR ALLEN SCHWARTZ			Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 9111 N KARLOV			Transaction ID : INCA121599
City SKOKIE	State IL	Zip Code 60076	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL PROD CONSULT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. MR JEFFREY SCOTT			Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 7330 EVEREST LANE - NORTH			Transaction ID : INCA121695
City MAPLE GROVE	State MN	Zip Code 55311	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. MS MONICA SCOZZARE			Date of Receipt MM / DD / YYYY 02 / 28 / 2013
Mailing Address 3021 E MILLCREEK ROAD			Transaction ID : INCA121550
City SALT LAKE CITY	State UT	Zip Code 84109	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. C			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36		

SUBTOTAL of Receipts This Page (optional).....▶	176.92
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 125 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR GEORGE SERPIKOV
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 PROSPECT AVE
 City WESTWOOD State NJ Zip Code 07675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP BUSINESS DEV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121705
 Amount of Each Receipt this Period
 76.92

B. MR JOHN SHEA
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 FRANKLIN TURNPIKE
 City ALLENDALE State NJ Zip Code 07401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation ASST COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121627
 Amount of Each Receipt this Period
 40.00

C. WENDELL SHERRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 748
 City COLLIERVILLE State TN Zip Code 38027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation DIR ACCDO CORP HR & TALENT MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121582
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 146.92
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 126 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. ANN SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 437 GLENDALE RD
 City WYCKOFF State NJ Zip Code 07481
 Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121565
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PUBLIC AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

B. MS SUZANNE STREDNAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 WATCHUNG DR
 City HAWTHORNE State NJ Zip Code 07506
 Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121682
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR CLINICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

C. MR MARK SULLIVAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 16025 PINE VALE PL.
 City MIDLOTHIAN State VA Zip Code 23113
 Date of Receipt 02 / 28 / 2013
Transaction ID : INCA121587
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation BUSINESS PROCESS SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS MARY THORSBY			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>2</td><td></td> <td>2</td><td>8</td><td></td> <td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	8		2	0	1	3														
Mailing Address 17326 ELLEN DR			Transaction ID : INCA121492																				
City LIVONIA	State MI	Zip Code 48152	Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																							
FEC ID number of contributing federal political committee. C																							
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>800.00</td> </tr> </table>	800.00																					
800.00																							

Full Name (Last, First, Middle Initial) B. MR JEFFREY TYLER			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>2</td><td></td> <td>2</td><td>8</td><td></td> <td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	8		2	0	1	3														
Mailing Address 37 KNOLL TERRACE			Transaction ID : INCA121524																				
City HAZLET	State NJ	Zip Code 07730	Amount of Each Receipt this Period <table border="1"> <tr> <td>30.77</td> </tr> </table>	30.77																			
30.77																							
FEC ID number of contributing federal political committee. C																							
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>246.16</td> </tr> </table>	246.16																					
246.16																							

Full Name (Last, First, Middle Initial) C. MS CATHERINE WASSON			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>2</td><td></td> <td>2</td><td>8</td><td></td> <td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		2	8		2	0	1	3														
Mailing Address 3912 CALLE ANDALUCIA			Transaction ID : INCA121685																				
City SAN CLEMENTE	State CA	Zip Code 92673	Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00																			
50.00																							
FEC ID number of contributing federal political committee. C																							
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATL ACCTS																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>400.00</td> </tr> </table>	400.00																					
400.00																							

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>180.77</td> </tr> </table>	180.77
180.77		
TOTAL 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR KENNETH WERMES
 Full Name (Last, First, Middle Initial)
 Mailing Address 26037 N WRANGLER RD
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP & GENERAL MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121608
 Amount of Each Receipt this Period
 200.00

B. MRS ELISSA WOJTOWICZ RPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 AZALEA PLACE
 City PISCATAWAY State NJ Zip Code 08854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR RRA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121578
 Amount of Each Receipt this Period
 30.00

C. MS JILL ZELMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 43604 EMERALD DUNES PL
 City LEESBURG State VA Zip Code 20176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013
Transaction ID : INCA121516
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	280.00
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 129 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR JAMES ZIRPOLI

Mailing Address **654 COPPER COVE CT**

City **LOVELAND** State **OH** Zip Code **45140**

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

Name of Employer **MEDCO HEALTH SOLUTIONS** Occupation **SR DIR PHARM OPS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
02 / 28 / 2013

Transaction ID : INCA121692

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. MR BARRY BOUDREAUX

Mailing Address **6527 SHORBURGH DRIVE**

City **INDIANAPOLIS** State **IN** Zip Code **46278**

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

Name of Employer **MEDCO HEALTH SOLUTIONS** Occupation **DIR PHARM PRACTICE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
03 / 07 / 2013

Transaction ID : INCA121921

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. MR JOHN FORD

Mailing Address **6 SILVER LAKE DRIVE**

City **SHAMONG** State **NJ** Zip Code **08088**

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

Name of Employer **MEDCO HEALTH SOLUTIONS** Occupation **VP/GM**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
03 / 07 / 2013

Transaction ID : INCA121916

Amount of Each Receipt this Period
15.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JAMES ZIRPOLI		Date of Receipt
Mailing Address 654 COPPER COVE CT		M M M / D D D / Y Y Y Y Y Y 03 / 07 / 2013
City	State	Zip Code
LOVELAND	OH	45140
FEC ID number of contributing federal political committee.		Transaction ID : INCA121747
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		25.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR DIR PHARM OPS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	375.00	

Full Name (Last, First, Middle Initial) B. MS LESLIE ACHTER		Date of Receipt
Mailing Address 821 ALBEMARLE STREET		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City	State	Zip Code
WYCKOFF	NJ	07481
FEC ID number of contributing federal political committee.		Transaction ID : INCA121728
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP ANALYTICAL SVCS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	400.00	

Full Name (Last, First, Middle Initial) C. MR EDWARD ADAMCIK		Date of Receipt
Mailing Address 1021 SUNSET RIDGE		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City	State	Zip Code
BRIDGEWATER	NJ	08807
FEC ID number of contributing federal political committee.		Transaction ID : INCA121779
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		76.92
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP PHARM CONTRACT & CONSULTING	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	615.36	

SUBTOTAL of Receipts This Page (optional).....▶	151.92
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 131 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR STEPHEN ADLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 BELLVALE LAKES RD
 City WARWICK State NY Zip Code 10990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP INFO TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121768
 Amount of Each Receipt this Period
 50.00

B. DR JODY ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3031 MOUNT HILL DR
 City MIDLOTHIAN State VA Zip Code 23113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation CHIEF CLINICAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121803
 Amount of Each Receipt this Period
 76.92

C. MR JAMES ALLOCCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 ROSS ROAD
 City SCARSDALE State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP INFO TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121769
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 176.92
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 132 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. Inderpal Bhandari
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 ARDSLEY ROAD
 City SCARSDALE State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CLINICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 14 / 2013
Transaction ID : INCA121781
 Amount of Each Receipt this Period 50.00

B. MR BARRY BOUDREAU
 Full Name (Last, First, Middle Initial)
 Mailing Address 6527 SHORBURGH DRIVE
 City INDIANAPOLIS State IN Zip Code 46278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PHARM PRACTICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 14 / 2013
Transaction ID : INCA121922
 Amount of Each Receipt this Period 25.00

C. MR KEVIN BURON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9305 DUCKWOOD TRAIL
 City WOODBURY State MN Zip Code 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM SYSTEMED SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt 03 / 14 / 2013
Transaction ID : INCA121822
 Amount of Each Receipt this Period 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 132.69
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 209
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MRS DOREEN CALDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 441 S ELM STREET
 City MAYWOOD State NJ Zip Code 07607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PRODUCT DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121786
 Amount of Each Receipt this Period
 40.00

B. MS MELISSA CARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BRIARCLIFF TERRACE
 City KINNELON State NJ Zip Code 07405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CHANNEL & GENERIC MKTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121836
 Amount of Each Receipt this Period
 57.69

C. MR DANIEL COLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2901 HIDDEN HILLS WAY
 City CORONA State CA Zip Code 92882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation VP OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121839
 Amount of Each Receipt this Period
 28.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.69
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 134 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. JOHN CORBETT

Mailing Address 124 FUHRMAN AVENUE

City State Zip Code
 RAMSEY NJ 07446

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 265.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121904

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. WARREN DAVIS

Mailing Address 3131 SADDLEGAIT COVE

City State Zip Code
 GERMANTOWN TN 38138

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

Name of Employer Occupation
 ACCREDO HEALTH GROUP VP STRATEGY & PRODUCT DEV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121852

Amount of Each Receipt this Period
 76.92

Full Name (Last, First, Middle Initial)
C. MR BENJAMIN DIMARCO

Mailing Address 4 ANN STREET

City State Zip Code
 VERONA NJ 07044

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121903

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 151.92

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: (check only one)	PAGE 135 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR DANA DUNCAN		Date of Receipt
Mailing Address 125 COMSTOCK TRAIL		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City EAST HAMPTON	State CT	Zip Code 06424
FEC ID number of contributing federal political committee. C		Transaction ID : INCA121755
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation SR DIR TECHNOLOGY		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
3125.00		

Full Name (Last, First, Middle Initial) B. MR STEPHEN DUNLEAVY		Date of Receipt
Mailing Address 14026 KNOX STREET		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City OVERLAND PARK	State KS	Zip Code 66221
FEC ID number of contributing federal political committee. C		Transaction ID : INCA121765
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation VP SALES SEGMENT LEADER		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
400.00		

Full Name (Last, First, Middle Initial) C. MR BRAD EPSTEIN		Date of Receipt
Mailing Address 359 LONG HILL ROAD EAST		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City BRIARCLIFF MANOR	State NY	Zip Code 10510
FEC ID number of contributing federal political committee. C		Transaction ID : INCA121831
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation VP CORP COMMUNICATIONS		57.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
461.52		

SUBTOTAL of Receipts This Page (optional).....▶	357.69
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR SCOTT ERHARDT		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>14</td> <td></td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		14		2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03		14		2013								
Mailing Address 11540 39TH AVE N		Transaction ID : INCA121764										
City PLYMOUTH	State MN	Zip Code 55441										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00											
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACCT SVCS & ADMIN											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00											

Full Name (Last, First, Middle Initial) B. MR EDWARD FISCHER		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>14</td> <td></td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		14		2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03		14		2013								
Mailing Address 465 OLD STONE RD		Transaction ID : INCA121830										
City RIDGEWOOD	State NJ	Zip Code 07450										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 57.70											
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL PROD INTEGRATION											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.60											

Full Name (Last, First, Middle Initial) C. MS AMY FOLEY		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>14</td> <td></td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		14		2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03		14		2013								
Mailing Address 4 ROCHAMBEAU ROAD		Transaction ID : INCA121837										
City POMPTON PLAINS	State NJ	Zip Code 07444										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 58.00											
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-COMMERCE											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 464.00											

SUBTOTAL of Receipts This Page (optional).....▶	165.70
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JOHN FORD		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>14</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	14	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	14	/	2013								
Mailing Address 6 SILVER LAKE DRIVE		Transaction ID : INCA121917										
City SHAMONG	State NJ	Zip Code 08088										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00											

Full Name (Last, First, Middle Initial) B. MR BARNEY GALLASSIO		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>14</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	14	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	14	/	2013								
Mailing Address 69 LAKEVIEW DR		Transaction ID : INCA121725										
City OLD TAPPAN	State NJ	Zip Code 07675										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIENT RELATIONS											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00											

Full Name (Last, First, Middle Initial) C. MR FRANK GENTILELLA		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>14</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	14	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	14	/	2013								
Mailing Address 20 BROOKSHIRE DR		Transaction ID : INCA121915										
City ROBBINSVILLE	State NJ	Zip Code 08691										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.70										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.60											

SUBTOTAL of Receipts This Page (optional).....▶	122.70
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 138 OF 209 (check only one)
<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. DARREN GETTINGS	Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2013 Transaction ID : INCA121784					
Mailing Address 4600 CROSSHAVEN CT	Amount of Each Receipt this Period 57.69					
<table style="width: 100%;"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WELDON SPRING</td> <td>MO</td> <td>63304</td> </tr> </table>		City	State	Zip Code	WELDON SPRING	MO
City	State	Zip Code				
WELDON SPRING	MO	63304				
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Aggregate Year-to-Date ▼ 461.52					
Name of Employer MEDCO HEALTH SOLUTIONS		Occupation VP PHARMACY NETWORK MGMT				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼						

Full Name (Last, First, Middle Initial) B. MR SCOTT GILYARD	Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2013 Transaction ID : INCA121761					
Mailing Address 305 BERGAMOT DRIVE	Amount of Each Receipt this Period 57.69					
<table style="width: 100%;"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>MEDINA</td> <td>MN</td> <td>55340</td> </tr> </table>		City	State	Zip Code	MEDINA	MN
City	State	Zip Code				
MEDINA	MN	55340				
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Aggregate Year-to-Date ▼ 461.52					
Name of Employer MEDCO HEALTH SOLUTIONS		Occupation PRES UHG				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼						

Full Name (Last, First, Middle Initial) C. MS GINA GRUHN	Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2013 Transaction ID : INCA121823					
Mailing Address 13 WEATHER VANE DRIVE	Amount of Each Receipt this Period 76.92					
<table style="width: 100%;"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>CONVENT STATION</td> <td>NJ</td> <td>07960</td> </tr> </table>		City	State	Zip Code	CONVENT STATION	NJ
City	State	Zip Code				
CONVENT STATION	NJ	07960				
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Aggregate Year-to-Date ▼ 615.36					
Name of Employer MEDCO HEALTH SOLUTIONS		Occupation VP/GM ACCOUNT SERVICES				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼						

SUBTOTAL of Receipts This Page (optional).....▶	192.30
TOTAL This Period (last page this line number only).....▶	192.30

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 139 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. SEAN HART		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>3</td><td></td> <td>1</td><td>4</td><td></td> <td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	4		2	0	1	3													
Mailing Address 4204 W 113TH STREET		Transaction ID : INCA121828																				
City LEAWOOD	State KS	Zip Code 66211																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PROD APPRVL AND COMM																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 538.44																					

Full Name (Last, First, Middle Initial) B. MR GLENN HOFFMAN		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>3</td><td></td> <td>1</td><td>4</td><td></td> <td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	4		2	0	1	3													
Mailing Address 974 HILLCREST ROAD		Transaction ID : INCA121782																				
City RIDGEWOOD	State NJ	Zip Code 07450																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FACILITIES																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36																					

Full Name (Last, First, Middle Initial) C. MR ROGER HOLLAND		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>3</td><td></td> <td>1</td><td>4</td><td></td> <td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	4		2	0	1	3													
Mailing Address 41 SAINT RAPHAEL		Transaction ID : INCA121914																				
City LAGUNA NIGUEL	State CA	Zip Code 92677																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.38																					

SUBTOTAL of Receipts This Page (optional).....▶	203.84
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 140 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. BRETT HUSELTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 AVONDALE DRIVE
 City NORTH WALES State PA Zip Code 19454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP BUSINESS DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121829
 Amount of Each Receipt this Period
 50.00

B. DR SUSAN ITO HOLLANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6366 SW 90TH STREET
 City GAINESVILLE State FL Zip Code 32608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC DIR CLINICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121792
 Amount of Each Receipt this Period
 50.00

C. MS MARIANNE JACKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 329 MORRIS AVENUE
 City MOUNTAIN LAKES State NJ Zip Code 07046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121716
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS TERESE JACKSON		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>3</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	4	/	2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	4	/	2	0	1	3													
Mailing Address 6085 S. PRESTON LANE		Transaction ID : INCA121717																				
City NEW BERLIN	State WI	Zip Code 53151																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00																					

Full Name (Last, First, Middle Initial) B. MS MICHELLE JAEGER		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>3</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	4	/	2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	4	/	2	0	1	3													
Mailing Address 14506 MCGINTY ROAD WEST		Transaction ID : INCA121722																				
City WAYZATA	State MN	Zip Code 55391																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00																					

Full Name (Last, First, Middle Initial) C. MR JASON JAMES		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>3</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	4	/	2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	4	/	2	0	1	3													
Mailing Address RR 2 BOX 2036		Transaction ID : INCA121797																				
City CANADENSIS	State PA	Zip Code 18325																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHYSICIAN ENGAGEMENT																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00																					

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MRS ANNE JOHNSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 S. HARBOUR ISLAND BLVD
 UNIT 432
 City TAMPA State FL Zip Code 33602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR INFO SERVICE CENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.92

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121812
 Amount of Each Receipt this Period
 25.00

B. MRS REGINA JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address POST OFFICE BOX 750995
 City LAS VEGAS State NV Zip Code 89136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CUST SVC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121751
 Amount of Each Receipt this Period
 75.00

C. MS KARIN KLEINEGGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 CONKLING TOWN ROAD
 City CHESTER State NY Zip Code 10918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR ACCT MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.92

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121743
 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: (check only one)	PAGE 143 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS KATHLEEN KORDUCKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 WINFIELD DR
 City BOWLING GREEN State OH Zip Code 43402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121718
 Amount of Each Receipt this Period
 50.00

B. MS CYNTHIA LAUBACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 KIMBERLY COURT
 City ROSEVILLE State CA Zip Code 95661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.38

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121730
 Amount of Each Receipt this Period
 50.00

C. PATRICK LINDSAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 RADCLIFF LANE
 City LOWER GWYNEDD State PA Zip Code 19002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP & GM CAPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121827
 Amount of Each Receipt this Period
 76.92

SUBTOTAL of Receipts This Page (optional).....	176.92
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: (check only one)	PAGE 144 OF 209
<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR WILLIAM MARTIN		Date of Receipt
Mailing Address 2601 FOX HLL CIRCLE EAST		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
GERMANTOWN	TN	38139
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA121838
ACCREDO HEALTH GROUP	GROUP VP BUS DEV	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.44"/>	<input type="text" value="76.93"/>

Full Name (Last, First, Middle Initial) B. DAVID MILLER		Date of Receipt
Mailing Address 7 CLOVER LANE		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
RANDOLPH	NJ	07869
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA121919
MEDCO HEALTH SOLUTIONS	VP LABOR RELATIONS	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="350.00"/>	<input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) C. MR CRAIG MORRIS		Date of Receipt
Mailing Address N 49 W 25648 MCKERROW DR		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
PEWAUKEE	WI	53072
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA121793
MEDCO HEALTH SOLUTIONS	EXEC DIR CLINICAL SVCS	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	<input type="text" value="50.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="176.93"/>
TOTAL 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 145 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. DAVID MUZINA MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2313 RIVERS EDGE DRIVE
 City State Zip Code
 WILLOUGHBY HILLS OH 44094
 Date of Receipt: 03 / 14 / 2013
Transaction ID : INCA121808
 Amount of Each Receipt this Period: 57.69
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: VP NATIONAL PRACTICE LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 461.52

B. MR MELVIN OHL
 Full Name (Last, First, Middle Initial)
 Mailing Address 274 E FRANKLIN TPKE
 City State Zip Code
 RIDGEWOOD NJ 07450
 Date of Receipt: 03 / 14 / 2013
Transaction ID : INCA121835
 Amount of Each Receipt this Period: 57.70
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: VP PROCUREMENT & INVENTORY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 461.60

C. MR VICTOR PERINI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1466 COUNTRY LAKE ESTATES DRIVE
 City State Zip Code
 CHESTERFIELD MO 63005
 Date of Receipt: 03 / 14 / 2013
Transaction ID : INCA121821
 Amount of Each Receipt this Period: 76.92
 FEC ID number of contributing federal political committee: C
 Name of Employer: ACCREDO HEALTH GROUP Occupation: VP INFUSION OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 615.36

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR THOMAS PETTYES		Date of Receipt
Mailing Address 8522 UPLAND LN NORTH		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
MAPLE GROVE	MN	55311
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121833
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SVP & GENERAL MGR	<input type="text" value="76.93"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.44"/>	

Full Name (Last, First, Middle Initial) B. MR THOMAS PIERCE		Date of Receipt
Mailing Address 10297 E. LAKE DR.		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
ENGLEWOOD	CO	80111
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121920
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP LABOR RELATIONS	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="415.38"/>	

Full Name (Last, First, Middle Initial) C. MRS MONICA REED		Date of Receipt
Mailing Address 8475 DUNHAM STATION DRIVE		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
TAMPA	FL	33647
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121911
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP PROF PRA	<input type="text" value="77.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="616.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="203.93"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR THOMAS REINCKENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 204 TOKENEKE RD
 City DARIEN State CT Zip Code 06820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PRODUCT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2013
Transaction ID : INCA121790
 Amount of Each Receipt this Period
76.92

B. MS DONNA ROSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 RED OAK LANE
 City KINNELON State NJ Zip Code 07405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP OPS-CLINICAL TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2013
Transaction ID : INCA121772
 Amount of Each Receipt this Period
50.00

C. JULIANA RUTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 475 WASHINGTON BLVD 4408N
 City JERSEY CITY State NJ Zip Code 07310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CLIENT SOLUTIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **461.52**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2013
Transaction ID : INCA121799
 Amount of Each Receipt this Period
57.69

SUBTOTAL of Receipts This Page (optional).....▶	184.61
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR DAVID SCHLETT		Date of Receipt
Mailing Address 339 GRAMERCY PL		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City	State	Zip Code
GLEN ROCK	NJ	07452
FEC ID number of contributing federal political committee.		Transaction ID : INCA121806
C		Amount of Each Receipt this Period
		76.92
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SVP FINANCIAL & ANALYTICAL SVC	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	615.36	

Full Name (Last, First, Middle Initial) B. FRANCIS SCHULTE		Date of Receipt
Mailing Address 5023 SW BERMUDA WAY		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City	State	Zip Code
PALM CITY	FL	34990
FEC ID number of contributing federal political committee.		Transaction ID : INCA121826
C		Amount of Each Receipt this Period
		57.50
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	EXEC OPS OFFICER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	460.00	

Full Name (Last, First, Middle Initial) C. MR ALLEN SCHWARTZ		Date of Receipt
Mailing Address 9111 N KARLOV		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City	State	Zip Code
SKOKIE	IL	60076
FEC ID number of contributing federal political committee.		Transaction ID : INCA121825
C		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR DIR CLINICAL PROD CONSULT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	400.00	

SUBTOTAL of Receipts This Page (optional).....▶	184.42
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR JEFFREY SCOTT

Mailing Address 7330 EVEREST LANE - NORTH

City	State	Zip Code
MAPLE GROVE	MN	55311

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	VP/GM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
03 / 14 / 2013

Transaction ID : INCA121918

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. MS MONICA SCOZZARE

Mailing Address 3021 E MILLCREEK ROAD

City	State	Zip Code
SALT LAKE CITY	UT	84109

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	VP CLINICAL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
03 / 14 / 2013

Transaction ID : INCA121780

Amount of Each Receipt this Period
76.92

Full Name (Last, First, Middle Initial)
C. MR GEORGE SERPIKOV

Mailing Address 66 PROSPECT AVE

City	State	Zip Code
WESTWOOD	NJ	07675

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	VP BUSINESS DEV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
03 / 14 / 2013

Transaction ID : INCA121928

Amount of Each Receipt this Period
76.92

SUBTOTAL of Receipts This Page (optional).....	203.84
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JOHN SHEA		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>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	4		2	0	1	3													
Mailing Address 62 FRANKLIN TURNPIKE		Transaction ID : INCA121853																				
City ALLENDALE	State NJ	Zip Code 07401																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00																					

Full Name (Last, First, Middle Initial) B. WENDELL SHERRELL		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>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	4		2	0	1	3													
Mailing Address PO BOX 748		Transaction ID : INCA121810																				
City COLLIERVILLE	State TN	Zip Code 38027																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00																				
Name of Employer ACCREDITO HEALTH GROUP	Occupation DIR ACCDO CORP HR & TALENT MGT																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00																					

Full Name (Last, First, Middle Initial) C. ANN SMITH		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>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	4		2	0	1	3													
Mailing Address 437 GLENDALE RD		Transaction ID : INCA121794																				
City WYCKOFF	State NJ	Zip Code 07481																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PUBLIC AFFAIRS																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00																					

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 151 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS SUZANNE STREDNAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 WATCHUNG DR
 City State Zip Code
 HAWTHORNE NJ 07506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR CLINICAL SVCS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121907
 Amount of Each Receipt this Period
 50.00

B. MR MARK SULLIVAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 16025 PINE VALE PL.
 City State Zip Code
 MIDLOTHIAN VA 23113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS BUSINESS PROCESS SPECIALIST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121815
 Amount of Each Receipt this Period
 50.00

C. MS MARY THORSBY
 Full Name (Last, First, Middle Initial)
 Mailing Address 17326 ELLEN DR
 City State Zip Code
 LIVONIA MI 48152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR NATL ACCT EXEC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121720
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 152 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR JEFFREY TYLER
 Mailing Address 37 KNOLL TERRACE
 City State Zip Code
 HAZLET NJ 07730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR TECHNOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 246.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121754
 Amount of Each Receipt this Period
 30.77

Full Name (Last, First, Middle Initial)
B. MS CATHERINE WASSON
 Mailing Address 3912 CALLE ANDALUCIA
 City State Zip Code
 SAN CLEMENTE CA 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP NATL ACCTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121910
 Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. MR KENNETH WERMES
 Mailing Address 26037 N WRANGLER RD
 City State Zip Code
 SCOTTSDALE AZ 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SVP & GENERAL MGR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : INCA121834
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.77
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MRS ELISSA WOJTOWICZ RPH		Date of Receipt
Mailing Address 43 AZALEA PLACE		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City	State	Zip Code
PISCATAWAY	NJ	08854
FEC ID number of contributing federal political committee.		Transaction ID : INCA121807
C		Amount of Each Receipt this Period
		30.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR DIR RRA	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	240.00	

Full Name (Last, First, Middle Initial) B. MS JILL ZELMAN		Date of Receipt
Mailing Address 43604 EMERALD DUNES PL		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City	State	Zip Code
LEESBURG	VA	20176
FEC ID number of contributing federal political committee.		Transaction ID : INCA121744
C		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP FINANCE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	400.00	

Full Name (Last, First, Middle Initial) C. MR JAMES ZIRPOLI		Date of Receipt
Mailing Address 654 COPPER COVE CT		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2013
City	State	Zip Code
LOVELAND	OH	45140
FEC ID number of contributing federal political committee.		Transaction ID : INCA121748
C		Amount of Each Receipt this Period
		25.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR DIR PHARM OPS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	375.00	

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BARRY BOUDREAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 6527 SHORBURGH DRIVE
 City INDIANAPOLIS State IN Zip Code 46278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PHARM PRACTICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 21 / 2013
Transaction ID : INCA122132
 Amount of Each Receipt this Period 25.00

B. MR JOHN FORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 SILVER LAKE DRIVE
 City SHAMONG State NJ Zip Code 08088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 21 / 2013
Transaction ID : INCA122127
 Amount of Each Receipt this Period 15.00

C. MR JAMES ZIRPOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 COPPER COVE CT
 City LOVELAND State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PHARM OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 21 / 2013
Transaction ID : INCA121965
 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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 155 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS LESLIE ACHTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 821 ALBEMARLE STREET
 City WYCKOFF State NJ Zip Code 07481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP ANALYTICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 28 / 2013
Transaction ID : INCA121948
 Amount of Each Receipt this Period 50.00

B. MR EDWARD ADAMCIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1021 SUNSET RIDGE
 City BRIDGEWATER State NJ Zip Code 08807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PHARM CONTRACT & CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 03 / 28 / 2013
Transaction ID : INCA121997
 Amount of Each Receipt this Period 76.92

C. DR JODY ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3031 MOUNT HILL DR
 City MIDLOTHIAN State VA Zip Code 23113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation CHIEF CLINICAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 03 / 28 / 2013
Transaction ID : INCA122022
 Amount of Each Receipt this Period 76.92

SUBTOTAL of Receipts This Page (optional)..... ▶ 203.84
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JAMES ALLOCCO			Date of Receipt		
Mailing Address 19 ROSS ROAD			M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013		
City SCARSDALE		State NY	Zip Code 10583		Transaction ID : INCA121986
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 57.69		
Name of Employer MEDCO HEALTH SOLUTIONS		Occupation VP INFO TECHNOLOGY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 415.38			

Full Name (Last, First, Middle Initial) B. INDERPAL BHANDARI			Date of Receipt		
Mailing Address 220 ARDSLEY ROAD			M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013		
City SCARSDALE		State NY	Zip Code 10583		Transaction ID : INCA121999
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 50.00		
Name of Employer MEDCO HEALTH SOLUTIONS		Occupation VP CLINICAL SVCS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

Full Name (Last, First, Middle Initial) C. MR BARRY BOUDREAUX			Date of Receipt		
Mailing Address 6527 SHORBURGH DRIVE			M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013		
City INDIANAPOLIS		State IN	Zip Code 46278		Transaction ID : INCA122133
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 25.00		
Name of Employer MEDCO HEALTH SOLUTIONS		Occupation DIR PHARM PRACTICE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00			

SUBTOTAL of Receipts This Page (optional).....▶	132.69
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 157 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR KEVIN BURON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9305 DUCKWOOD TRAIL
 City State Zip Code
 WOODBURY MN 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM SYSTEMED SALES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122039
 Amount of Each Receipt this Period
 57.69

B. MRS DOREEN CALDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 441 S ELM STREET
 City State Zip Code
 MAYWOOD NJ 07607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR PRODUCT DEVELOPMENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122004
 Amount of Each Receipt this Period
 40.00

C. MS MELISSA CARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BRIARCLIFF TERRACE
 City State Zip Code
 KINNELON NJ 07405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CHANNEL & GENERIC MKTING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122053
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.38
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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR DANIEL COLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2901 HIDDEN HILLS WAY
 City CORONA State CA Zip Code 92882
 Date of Receipt 03 / 28 / 2013
Transaction ID : INCA122056
 Amount of Each Receipt this Period 28.00
 FEC ID number of contributing federal political committee. C
 Name of Employer ACCREDO HEALTH GROUP Occupation VP OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

B. JOHN CORBETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 124 FUHRMAN AVENUE
 City RAMSEY State NJ Zip Code 07446
 Date of Receipt 03 / 28 / 2013
Transaction ID : INCA122115
 Amount of Each Receipt this Period 57.69
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.38

C. WARREN DAVIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3131 SADDLEGAIT COVE
 City GERMANTOWN State TN Zip Code 38138
 Date of Receipt 03 / 28 / 2013
Transaction ID : INCA122065
 Amount of Each Receipt this Period 76.92
 FEC ID number of contributing federal political committee. C
 Name of Employer ACCREDO HEALTH GROUP Occupation VP STRATEGY & PRODUCT DEV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

SUBTOTAL of Receipts This Page (optional).....▶ 162.61
TOTAL This Period (last page this line number only).....▶

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

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

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BENJAMIN DIMARCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 ANN STREET
 City VERONA State NJ Zip Code 07044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122114
 Amount of Each Receipt this Period
 60.00

B. MR DANA DUNCAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 COMSTOCK TRAIL
 City EAST HAMPTON State CT Zip Code 06424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA121973
 Amount of Each Receipt this Period
 250.00

C. MR STEPHEN DUNLEAVY
 Full Name (Last, First, Middle Initial)
 Mailing Address 14026 KNOX STREET
 City OVERLAND PARK State KS Zip Code 66221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP SALES SEGMENT LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA121983
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 360.00
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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BRAD EPSTEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 359 LONG HILL ROAD EAST
 City State Zip Code
 BRIARCLIFF MANOR NY 10510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CORP COMMUNICATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122048
 Amount of Each Receipt this Period
 57.69

B. MR SCOTT ERHARDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 11540 39TH AVE N
 City State Zip Code
 PLYMOUTH MN 55441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP ACCT SVCS & ADMIN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA121982
 Amount of Each Receipt this Period
 50.00

C. MR EDWARD FISCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 465 OLD STONE RD
 City State Zip Code
 RIDGEWOOD NJ 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CLINICAL PROD INTEGRATION
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122047
 Amount of Each Receipt this Period
 57.70

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.39
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

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MS AMY FOLEY
 Mailing Address 4 ROCHAMBEAU ROAD
 City State Zip Code
 POMPTON PLAINS NJ 07444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP E-COMMERCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 464.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122054
 Amount of Each Receipt this Period
 58.00

Full Name (Last, First, Middle Initial)
B. MR JOHN FORD
 Mailing Address 6 SILVER LAKE DRIVE
 City State Zip Code
 SHAMONG NJ 08088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122128
 Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
C. MR BARNEY GALLASSIO
 Mailing Address 69 LAKEVIEW DR
 City State Zip Code
 OLD TAPPAN NJ 07675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CLIENT RELATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA121945
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 123.00
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

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR FRANK GENTILELLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 BROOKSHIRE DR
 City ROBBINSVILLE State NJ Zip Code 08691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122126
 Amount of Each Receipt this Period
 57.70

B. DARREN GETTINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 CROSSHAVEN CT
 City WELDON SPRING State MO Zip Code 63304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PHARMACY NETWORK MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122002
 Amount of Each Receipt this Period
 57.69

C. MR SCOTT GILYARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 305 BERGAMOT DRIVE
 City MEDINA State MN Zip Code 55340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation PRES UHG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA121979
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 173.08
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS GINA GRUHN		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>28</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	28	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	28	/	2013								
Mailing Address 13 WEATHER VANE DRIVE		Transaction ID : INCA122040										
City CONVENT STATION	State NJ	Zip Code 07960										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM ACCOUNT SERVICES											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36											

Full Name (Last, First, Middle Initial) B. SEAN HART		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>28</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	28	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	28	/	2013								
Mailing Address 4204 W 113TH STREET		Transaction ID : INCA122045										
City LEAWOOD	State KS	Zip Code 66211										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PROD APPRVL AND COMM											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 538.44											

Full Name (Last, First, Middle Initial) C. MR GLENN HOFFMAN		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>28</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	28	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	28	/	2013								
Mailing Address 974 HILLCREST ROAD		Transaction ID : INCA122000										
City RIDGEWOOD	State NJ	Zip Code 07450										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FACILITIES											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36											

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR ROGER HOLLAND		Date of Receipt
Mailing Address 41 SAINT RAPHAEL		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013
City	State	Zip Code
LAGUNA NIGUEL	CA	92677
FEC ID number of contributing federal political committee.	C	Transaction ID : INCA122125
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP SALES	57.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	415.38	

Full Name (Last, First, Middle Initial) B. BRETT HUSELTON		Date of Receipt
Mailing Address 120 AVONDALE DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013
City	State	Zip Code
NORTH WALES	PA	19454
FEC ID number of contributing federal political committee.	C	Transaction ID : INCA122046
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP BUSINESS DEVELOPMENT	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	400.00	

Full Name (Last, First, Middle Initial) C. DR SUSAN ITO HOLLANDER		Date of Receipt
Mailing Address 6366 SW 90TH STREET		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013
City	State	Zip Code
GAINESVILLE	FL	32608
FEC ID number of contributing federal political committee.	C	Transaction ID : INCA122010
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	EXEC DIR CLINICAL SVCS	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	400.00	

SUBTOTAL of Receipts This Page (optional).....▶	157.69
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS MARIANNE JACKS		Date of Receipt
Mailing Address 329 MORRIS AVENUE		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013
City	State	Zip Code
MOUNTAIN LAKES	NJ	07046
FEC ID number of contributing federal political committee. C		Transaction ID : INCA121937
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation SR NATL ACCT EXEC		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	400.00	

Full Name (Last, First, Middle Initial) B. MS TERESE JACKSON		Date of Receipt
Mailing Address 6085 S. PRESTON LANE		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013
City	State	Zip Code
NEW BERLIN	WI	53151
FEC ID number of contributing federal political committee. C		Transaction ID : INCA121938
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation SR NATL ACCT EXEC		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	400.00	

Full Name (Last, First, Middle Initial) C. MR JASON JAMES		Date of Receipt
Mailing Address RR 2 BOX 2036		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013
City	State	Zip Code
CANADENSIS	PA	18325
FEC ID number of contributing federal political committee. C		Transaction ID : INCA122016
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation DIR PHYSICIAN ENGAGEMENT		35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	280.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MRS ANNE JOHNSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 S. HARBOUR ISLAND BLVD
 UNIT 432
 City TAMPA State FL Zip Code 33602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR INFO SERVICE CENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.92

Date of Receipt 03 / 28 / 2013
Transaction ID : INCA122031
 Amount of Each Receipt this Period 38.46

B. MRS REGINA JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address POST OFFICE BOX 750995
 City LAS VEGAS State NV Zip Code 89136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CUST SVC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 28 / 2013
Transaction ID : INCA121969
 Amount of Each Receipt this Period 75.00

C. MS KARIN KLEINEGGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 CONKLING TOWN ROAD
 City CHESTER State NY Zip Code 10918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR ACCT MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.92

Date of Receipt 03 / 28 / 2013
Transaction ID : INCA121960
 Amount of Each Receipt this Period 38.46

SUBTOTAL of Receipts This Page (optional)..... ▶ 151.92
TOTAL This Period (last page this line number only)..... ▶

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

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	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS KATHLEEN KORDUCKI		Date of Receipt
Mailing Address 159 WINFIELD DR		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013
City	State	Zip Code
BOWLING GREEN	OH	43402
FEC ID number of contributing federal political committee.		Transaction ID : INCA121939
C		Amount of Each Receipt this Period
		400.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR NATL ACCT EXEC	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	400.00	

Full Name (Last, First, Middle Initial) B. MS CYNTHIA LAUBACHER		Date of Receipt
Mailing Address 1100 KIMBERLY COURT		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013
City	State	Zip Code
ROSEVILLE	CA	95661
FEC ID number of contributing federal political committee.		Transaction ID : INCA121949
C		Amount of Each Receipt this Period
		57.69
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR DIR GOVERNMENT AFFAIRS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	415.38	

Full Name (Last, First, Middle Initial) C. PATRICK LINDSAY		Date of Receipt
Mailing Address 1001 RADCLIFF LANE		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2013
City	State	Zip Code
LOWER GWYNEDD	PA	19002
FEC ID number of contributing federal political committee.		Transaction ID : INCA122044
C		Amount of Each Receipt this Period
		76.92
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SVP & GM CAPS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	615.36	

SUBTOTAL of Receipts This Page (optional).....▶	184.61
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR WILLIAM MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2601 FOX HLL CIRCLE EAST

City GERMANTOWN	State TN	Zip Code 38139
--------------------	-------------	-------------------

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

Name of Employer ACCREDITO HEALTH GROUP	Occupation GROUP VP BUS DEV
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.44**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2013

Transaction ID : INCA122055

Amount of Each Receipt this Period
76.93

B. DAVID MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 CLOVER LANE

City RANDOLPH	State NJ	Zip Code 07869
------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABOR RELATIONS
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2013

Transaction ID : INCA122130

Amount of Each Receipt this Period
50.00

C. MR CRAIG MORRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address N 49 W 25648 MCKERROW DR

City PEWAUKEE	State WI	Zip Code 53072
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FEC ID number of contributing federal political committee. **C**

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR CLINICAL SVCS
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2013

Transaction ID : INCA122011

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	176.93
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. DAVID MUZINA MD		Date of Receipt
Mailing Address 2313 RIVERS EDGE DRIVE		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
WILLOUGHBY HILLS	OH	44094
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122027
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP NATIONAL PRACTICE LEADER	<input type="text" value="57.69"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="461.52"/>	

Full Name (Last, First, Middle Initial) B. MR MELVIN OHL		Date of Receipt
Mailing Address 274 E FRANKLIN TPKE		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
RIDGEWOOD	NJ	07450
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122052
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP PROCUREMENT & INVENTORY	<input type="text" value="57.70"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="461.60"/>	

Full Name (Last, First, Middle Initial) C. MR VICTOR PERINI		Date of Receipt
Mailing Address 1466 COUNTRY LAKE ESTATES DRIVE		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
CHESTERFIELD	MO	63005
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122038
Name of Employer	Occupation	Amount of Each Receipt this Period
ACCREDITO HEALTH GROUP	VP INFUSION OPS	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="192.31"/>
TOTAL 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 170 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR THOMAS PETTYES
 Full Name (Last, First, Middle Initial)
 Mailing Address 8522 UPLAND LN NORTH
 City State Zip Code
 MAPLE GROVE MN 55311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SVP & GENERAL MGR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 615.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122050
 Amount of Each Receipt this Period
 76.93

B. MR THOMAS PIERCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10297 E. LAKE DR.
 City State Zip Code
 ENGLEWOOD CO 80111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP LABOR RELATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 415.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122131
 Amount of Each Receipt this Period
 57.69

C. MRS MONICA REED
 Full Name (Last, First, Middle Initial)
 Mailing Address 8475 DUNHAM STATION DRIVE
 City State Zip Code
 TAMPA FL 33647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP PROF PRA
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 616.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122122
 Amount of Each Receipt this Period
 77.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 211.62
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR THOMAS REINCKENS			Date of Receipt																						
Mailing Address 204 TOKENEKE RD			<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>03</td><td></td><td></td><td>28</td><td></td><td></td><td>2013</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	03			28			2013			
M	M	/	D	D	/	Y	Y	Y	Y																
03			28			2013																			
City State Zip Code DARIEN CT 06820			Transaction ID : INCA122008																						
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer Occupation MEDCO HEALTH SOLUTIONS VP PRODUCT			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>76.92</td> </tr> </table>																						76.92
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Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼																						
			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>615.36</td> </tr> </table>																						615.36
									615.36																

Full Name (Last, First, Middle Initial) B. MS DONNA ROSEN			Date of Receipt																						
Mailing Address 7 RED OAK LANE			<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>03</td><td></td><td></td><td>28</td><td></td><td></td><td>2013</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	03			28			2013			
M	M	/	D	D	/	Y	Y	Y	Y																
03			28			2013																			
City State Zip Code KINNELON NJ 07405			Transaction ID : INCA121989																						
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer Occupation MEDCO HEALTH SOLUTIONS VP OPS-CLINICAL TECH			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>50.00</td> </tr> </table>																						50.00
									50.00																
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼																						
			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>400.00</td> </tr> </table>																						400.00
									400.00																

Full Name (Last, First, Middle Initial) C. JULIANA RUTH			Date of Receipt																						
Mailing Address 475 WASHINGTON BLVD 4408N			<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>03</td><td></td><td></td><td>28</td><td></td><td></td><td>2013</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	03			28			2013			
M	M	/	D	D	/	Y	Y	Y	Y																
03			28			2013																			
City State Zip Code JERSEY CITY NJ 07310			Transaction ID : INCA122018																						
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer Occupation MEDCO HEALTH SOLUTIONS VP CLIENT SOLUTIONS			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>57.69</td> </tr> </table>																						57.69
									57.69																
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼																						
			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>461.52</td> </tr> </table>																						461.52
									461.52																

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>184.61</td> </tr> </table>																				184.61
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TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																				

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

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

FOR LINE NUMBER: PAGE 172 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR DAVID SCHLETT

Mailing Address 339 GRAMERCY PL

City State Zip Code
 GLEN ROCK NJ 07452

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SVP FINANCIAL & ANALYTICAL SVC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013

Transaction ID : INCA122025

Amount of Each Receipt this Period
 76.92

Full Name (Last, First, Middle Initial)
B. FRANCIS SCHULTE

Mailing Address 5023 SW BERMUDA WAY

City State Zip Code
 PALM CITY FL 34990

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS EXEC OPS OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013

Transaction ID : INCA122043

Amount of Each Receipt this Period
 57.50

Full Name (Last, First, Middle Initial)
C. MR ALLEN SCHWARTZ

Mailing Address 9111 N KARLOV

City State Zip Code
 SKOKIE IL 60076

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR CLINICAL PROD CONSULT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013

Transaction ID : INCA122042

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 184.42

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JEFFREY SCOTT		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>28</td> <td></td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		28		2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03		28		2013								
Mailing Address 7330 EVEREST LANE - NORTH		Transaction ID : INCA122129										
City MAPLE GROVE	State MN	Zip Code 55311										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00											

Full Name (Last, First, Middle Initial) B. MS MONICA SCOZZARE		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>28</td> <td></td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		28		2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03		28		2013								
Mailing Address 3021 E MILLCREEK ROAD		Transaction ID : INCA121998										
City SALT LAKE CITY	State UT	Zip Code 84109										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36											

Full Name (Last, First, Middle Initial) C. MR GEORGE SERPIKOV		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>28</td> <td></td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		28		2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03		28		2013								
Mailing Address 66 PROSPECT AVE		Transaction ID : INCA122139										
City WESTWOOD	State NJ	Zip Code 07675										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS DEV											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36											

SUBTOTAL of Receipts This Page (optional).....▶	203.84
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 174 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR JOHN SHEA
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 FRANKLIN TURNPIKE
 City ALLENDALE State NJ Zip Code 07401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation ASST COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122066
 Amount of Each Receipt this Period
 40.00

B. WENDELL SHERRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 748
 City COLLIERVILLE State TN Zip Code 38027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation DIR ACCDO CORP HR & TALENT MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122029
 Amount of Each Receipt this Period
 30.00

C. ANN SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 437 GLENDALE RD
 City WYCKOFF State NJ Zip Code 07481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PUBLIC AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122012
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS SUZANNE STREDNAK		Date of Receipt
Mailing Address 157 WATCHUNG DR		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
HAWTHORNE	NJ	07506
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122118
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR CLINICAL SVCS	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. MR MARK SULLIVAN		Date of Receipt
Mailing Address 16025 PINE VALE PL.		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDLOTHIAN	VA	23113
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122033
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	BUSINESS PROCESS SPECIALIST	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. MS MARY THORSBY		Date of Receipt
Mailing Address 17326 ELLEN DR		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
LIVONIA	MI	48152
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA121941
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR NATL ACCT EXEC	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="800.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR JEFFREY TYLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 KNOLL TERRACE
 City HAZLET State NJ Zip Code 07730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA121972
 Amount of Each Receipt this Period
 30.77

B. MS CATHERINE WASSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3912 CALLE ANDALUCIA
 City SAN CLEMENTE State CA Zip Code 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP NATL ACCTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122121
 Amount of Each Receipt this Period
 50.00

C. MR KENNETH WERMES
 Full Name (Last, First, Middle Initial)
 Mailing Address 26037 N WRANGLER RD
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP & GENERAL MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : INCA122051
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	280.77
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 177 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MRS ELISSA WOJTOWICZ RPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 AZALEA PLACE
 City PISCATAWAY State NJ Zip Code 08854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR RRA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 28 / 2013
Transaction ID : INCA122026
 Amount of Each Receipt this Period 30.00

B. MS JILL ZELMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 43604 EMERALD DUNES PL
 City LEESBURG State VA Zip Code 20176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 28 / 2013
Transaction ID : INCA121961
 Amount of Each Receipt this Period 50.00

C. MR JAMES ZIRPOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 COPPER COVE CT
 City LOVELAND State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PHARM OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 28 / 2013
Transaction ID : INCA121966
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 178 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BARRY BOUDREAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 6527 SHORBURGH DRIVE
 City INDIANAPOLIS State IN Zip Code 46278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PHARM PRACTICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2013
Transaction ID : INCA122332
 Amount of Each Receipt this Period
 25.00

B. MR JOHN FORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 SILVER LAKE DRIVE
 City SHAMONG State NJ Zip Code 08088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2013
Transaction ID : INCA122328
 Amount of Each Receipt this Period
 15.00

C. MR JAMES ZIRPOLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 COPPER COVE CT
 City LOVELAND State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PHARM OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2013
Transaction ID : INCA122175
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS LESLIE ACHTER		Date of Receipt
Mailing Address 821 ALBEMARLE STREET		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
WYCKOFF	NJ	07481
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA122159
MEDCO HEALTH SOLUTIONS	VP ANALYTICAL SVCS	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	<input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) B. MR EDWARD ADAMCIK		Date of Receipt
Mailing Address 1021 SUNSET RIDGE		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
BRIDGEWATER	NJ	08807
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA122204
MEDCO HEALTH SOLUTIONS	VP PHARM CONTRACT & CONSULTING	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	<input type="text" value="76.92"/>

Full Name (Last, First, Middle Initial) C. DR JODY ALLEN		Date of Receipt
Mailing Address 3031 MOUNT HILL DR		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDLOTHIAN	VA	23113
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA122229
MEDCO HEALTH SOLUTIONS	CHIEF CLINICAL OFFICER	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	<input type="text" value="76.92"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="203.84"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 180 OF 209
<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JAMES ALLOCCO		Date of Receipt
Mailing Address 19 ROSS ROAD		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City SCARSDALE	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA122193
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation VP INFO TECHNOLOGY		<input type="text" value="57.69"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="415.38"/>		

Full Name (Last, First, Middle Initial) B. INDERPAL BHANDARI		Date of Receipt
Mailing Address 220 ARDSLEY ROAD		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City SCARSDALE	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA122206
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation VP CLINICAL SVCS		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="400.00"/>		

Full Name (Last, First, Middle Initial) C. MR BARRY BOUDREAUX		Date of Receipt
Mailing Address 6527 SHORBURGH DRIVE		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City INDIANAPOLIS	State IN	Zip Code 46278
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA122333
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation DIR PHARM PRACTICE		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="375.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="132.69"/>
TOTAL 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 181 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR KEVIN BURON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9305 DUCKWOOD TRAIL
 City State Zip Code
 WOODBURY MN 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM SYSTEMED SALES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122246
 Amount of Each Receipt this Period
 57.69

B. MRS DOREEN CALDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 441 S ELM STREET
 City State Zip Code
 MAYWOOD NJ 07607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR PRODUCT DEVELOPMENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122211
 Amount of Each Receipt this Period
 40.00

C. MS MELISSA CARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BRIARCLIFF TERRACE
 City State Zip Code
 KINNELON NJ 07405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CHANNEL & GENERIC MKTING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122259
 Amount of Each Receipt this Period
 57.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.38
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 182 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR DANIEL COLE

Mailing Address 2901 HIDDEN HILLS WAY

City State Zip Code
 CORONA CA 92882

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

Name of Employer Occupation
 ACCREDO HEALTH GROUP VP OPS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : INCA122262

Amount of Each Receipt this Period
 28.00

Full Name (Last, First, Middle Initial)
B. JOHN CORBETT

Mailing Address 124 FUHRMAN AVENUE

City State Zip Code
 RAMSEY NJ 07446

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 265.38

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : INCA122316

Amount of Each Receipt this Period
 57.69

Full Name (Last, First, Middle Initial)
C. WARREN DAVIS

Mailing Address 3131 SADDLEGAIT COVE

City State Zip Code
 GERMANTOWN TN 38138

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

Name of Employer Occupation
 ACCREDO HEALTH GROUP VP STRATEGY & PRODUCT DEV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : INCA122271

Amount of Each Receipt this Period
 76.92

SUBTOTAL of Receipts This Page (optional)..... ▶ 162.61

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR BENJAMIN DIMARCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 ANN STREET

City	State	Zip Code
VERONA	NJ	07044

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	SR ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122315

Amount of Each Receipt this Period
 60.00

B. MR DANA DUNCAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 COMSTOCK TRAIL

City	State	Zip Code
EAST HAMPTON	CT	06424

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	SR DIR TECHNOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3125.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122182

Amount of Each Receipt this Period
 250.00

C. MR STEPHEN DUNLEAVY
 Full Name (Last, First, Middle Initial)
 Mailing Address 14026 KNOX STREET

City	State	Zip Code
OVERLAND PARK	KS	66221

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	VP SALES SEGMENT LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122190

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	360.00
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 184 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR BRAD EPSTEIN

Mailing Address 359 LONG HILL ROAD EAST

City State Zip Code
 BRIARCLIFF MANOR NY 10510

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CORP COMMUNICATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : INCA122254

Amount of Each Receipt this Period
 57.69

Full Name (Last, First, Middle Initial)
B. MR EDWARD FISCHER

Mailing Address 465 OLD STONE RD

City State Zip Code
 RIDGEWOOD NJ 07450

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CLINICAL PROD INTEGRATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 461.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : INCA122253

Amount of Each Receipt this Period
 57.70

Full Name (Last, First, Middle Initial)
C. MS AMY FOLEY

Mailing Address 4 ROCHAMBEAU ROAD

City State Zip Code
 POMPTON PLAINS NJ 07444

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP E-COMMERCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 464.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : INCA122260

Amount of Each Receipt this Period
 58.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 173.39

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 185 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR JOHN FORD
 Mailing Address 6 SILVER LAKE DRIVE
 City State Zip Code
 SHAMONG NJ 08088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122329
 Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
B. MR BARNEY GALLASSIO
 Mailing Address 69 LAKEVIEW DR
 City State Zip Code
 OLD TAPPAN NJ 07675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP CLIENT RELATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122156
 Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. MR FRANK GENTILELLA
 Mailing Address 20 BROOKSHIRE DR
 City State Zip Code
 ROBBINSVILLE NJ 08691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP/GM
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 461.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122327
 Amount of Each Receipt this Period
 57.70

SUBTOTAL of Receipts This Page (optional)..... ▶ 122.70
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. DARREN GETTINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 CROSSHAVEN CT
 City WELDON SPRING State MO Zip Code 63304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP PHARMACY NETWORK MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122209
 Amount of Each Receipt this Period
 57.69

B. MR SCOTT GILYARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 305 BERGAMOT DRIVE
 City MEDINA State MN Zip Code 55340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation PRES UHG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122187
 Amount of Each Receipt this Period
 57.69

C. MS GINA GRUHN
 Full Name (Last, First, Middle Initial)
 Mailing Address 13 WEATHER VANE DRIVE
 City CONVENT STATION State NJ Zip Code 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM ACCOUNT SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122247
 Amount of Each Receipt this Period
 76.92

SUBTOTAL of Receipts This Page (optional).....▶	192.30
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR GLENN HOFFMAN			Date of Receipt
Mailing Address 974 HILLCREST ROAD			<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA122207
RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="76.92"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	VP FACILITIES		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="615.36"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR ROGER HOLLAND			Date of Receipt
Mailing Address 41 SAINT RAPHAEL			<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA122326
LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="57.69"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	VP SALES		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="415.38"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. BRETT HUSELTON			Date of Receipt
Mailing Address 120 AVONDALE DRIVE			<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : INCA122252
NORTH WALES	PA	19454	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
MEDCO HEALTH SOLUTIONS	VP BUSINESS DEVELOPMENT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="184.61"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 188 OF 209
<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. DR SUSAN ITO HOLLANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6366 SW 90TH STREET
 City Gainesville State FL Zip Code 32608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC DIR CLINICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 11 / 2013
Transaction ID : INCA122217
 Amount of Each Receipt this Period 50.00

B. MS MARIANNE JACKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 329 MORRIS AVENUE
 City Mountain Lakes State NJ Zip Code 07046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 11 / 2013
Transaction ID : INCA122148
 Amount of Each Receipt this Period 50.00

C. MS TERESE JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6085 S. PRESTON LANE
 City New Berlin State WI Zip Code 53151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 11 / 2013
Transaction ID : INCA122149
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JASON JAMES		Date of Receipt
Mailing Address RR 2 BOX 2036		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
CANADENSIS	PA	18325
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA122223
MEDCO HEALTH SOLUTIONS	DIR PHYSICIAN ENGAGEMENT	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="280.00"/>	<input type="text" value="35.00"/>

Full Name (Last, First, Middle Initial) B. MRS ANNE JOHNSTON		Date of Receipt
Mailing Address 700 S. HARBOUR ISLAND BLVD UNIT 432		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
TAMPA	FL	33602
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA122238
MEDCO HEALTH SOLUTIONS	SR DIR INFO SERVICE CENTER	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="226.92"/>	<input type="text" value="38.46"/>

Full Name (Last, First, Middle Initial) C. MRS REGINA JONES		Date of Receipt
Mailing Address POST OFFICE BOX 750995		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
LAS VEGAS	NV	89136
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA122179
MEDCO HEALTH SOLUTIONS	VP CUST SVC	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="148.46"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MS KARIN KLEINEGGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 CONKLING TOWN ROAD

City CHESTER	State NY	Zip Code 10918
-----------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **226.92**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 11 / 2013

Transaction ID : INCA122170

Amount of Each Receipt this Period
38.46

B. MS KATHLEEN KORDUCKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 WINFIELD DR

City BOWLING GREEN	State OH	Zip Code 43402
-----------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 11 / 2013

Transaction ID : INCA122150

Amount of Each Receipt this Period
50.00

C. MS CYNTHIA LAUBACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 KIMBERLY COURT

City ROSEVILLE	State CA	Zip Code 95661
-------------------	-------------	-------------------

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

Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR GOVERNMENT AFFAIRS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **415.38**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 11 / 2013

Transaction ID : INCA122160

Amount of Each Receipt this Period
57.69

SUBTOTAL of Receipts This Page (optional).....▶	146.15
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 191 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. PATRICK LINDSAY

Mailing Address 1001 RADCLIFF LANE

City State Zip Code
 LOWER GWYNEDD PA 19002

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SVP & GM CAPS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : INCA122251

Amount of Each Receipt this Period
 76.92

Full Name (Last, First, Middle Initial)
B. MR WILLIAM MARTIN

Mailing Address 2601 FOX HLL CIRCLE EAST

City State Zip Code
 GERMANTOWN TN 38139

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

Name of Employer Occupation
 ACCREDO HEALTH GROUP GROUP VP BUS DEV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 615.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : INCA122261

Amount of Each Receipt this Period
 76.93

Full Name (Last, First, Middle Initial)
C. MR CRAIG MORRIS

Mailing Address N 49 W 25648 MCKERROW DR

City State Zip Code
 PEWAUKEE WI 53072

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS EXEC DIR CLINICAL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : INCA122218

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 203.85

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 192 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. DAVID MUZINA MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2313 RIVERS EDGE DRIVE
 City State Zip Code
 WILLOUGHBY HILLS OH 44094
 Date of Receipt: 04 / 11 / 2013
Transaction ID : INCA122234
 Amount of Each Receipt this Period: 57.69
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: VP NATIONAL PRACTICE LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼: 461.52

B. MR MELVIN OHL
 Full Name (Last, First, Middle Initial)
 Mailing Address 274 E FRANKLIN TPKE
 City State Zip Code
 RIDGEWOOD NJ 07450
 Date of Receipt: 04 / 11 / 2013
Transaction ID : INCA122258
 Amount of Each Receipt this Period: 57.70
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: VP PROCUREMENT & INVENTORY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼: 461.60

C. MR VICTOR PERINI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1466 COUNTRY LAKE ESTATES DRIVE
 City State Zip Code
 CHESTERFIELD MO 63005
 Date of Receipt: 04 / 11 / 2013
Transaction ID : INCA122245
 Amount of Each Receipt this Period: 76.92
 FEC ID number of contributing federal political committee: C
 Name of Employer: ACCREDO HEALTH GROUP Occupation: VP INFUSION OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼: 615.36

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR THOMAS PETTYES		Date of Receipt
Mailing Address 8522 UPLAND LN NORTH		M M M / D D D / Y Y Y Y Y Y 04 / 11 / 2013
City	State	Zip Code
MAPLE GROVE	MN	55311
FEC ID number of contributing federal political committee. C		Transaction ID : INCA122256
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation SVP & GENERAL MGR		76.93
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		615.44

Full Name (Last, First, Middle Initial) B. MR THOMAS PIERCE		Date of Receipt
Mailing Address 10297 E. LAKE DR.		M M M / D D D / Y Y Y Y Y Y 04 / 11 / 2013
City	State	Zip Code
ENGLEWOOD	CO	80111
FEC ID number of contributing federal political committee. C		Transaction ID : INCA122331
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation VP LABOR RELATIONS		57.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		415.38

Full Name (Last, First, Middle Initial) C. MRS MONICA REED		Date of Receipt
Mailing Address 8475 DUNHAM STATION DRIVE		M M M / D D D / Y Y Y Y Y Y 04 / 11 / 2013
City	State	Zip Code
TAMPA	FL	33647
FEC ID number of contributing federal political committee. C		Transaction ID : INCA122323
Name of Employer MEDCO HEALTH SOLUTIONS		Amount of Each Receipt this Period
Occupation VP PROF PRA		77.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		616.00

SUBTOTAL of Receipts This Page (optional).....▶	211.62
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 194 OF 209
<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR THOMAS REINCKENS		Date of Receipt
Mailing Address 204 TOKENEKE RD		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
DARIEN	CT	06820
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122215
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP PRODUCT	<input type="text" value="76.92"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="615.36"/>	

Full Name (Last, First, Middle Initial) B. MS DONNA ROSEN		Date of Receipt
Mailing Address 7 RED OAK LANE		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
KINNELON	NJ	07405
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122196
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP OPS-CLINICAL TECH	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. JULIANA RUTH		Date of Receipt
Mailing Address 475 WASHINGTON BLVD 4408N		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
JERSEY CITY	NJ	07310
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122225
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP CLIENT SOLUTIONS	<input type="text" value="57.69"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="461.52"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="184.61"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 209
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR DAVID SCHLETT		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>4</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	1	/	2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	1	1	/	2	0	1	3													
Mailing Address 339 GRAMERCY PL		Transaction ID : INCA122232																				
City GLEN ROCK	State NJ	Zip Code 07452																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCIAL & ANALYTICAL SVC																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36																					

Full Name (Last, First, Middle Initial) B. FRANCIS SCHULTE		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>4</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	1	/	2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	1	1	/	2	0	1	3													
Mailing Address 5023 SW BERMUDA WAY		Transaction ID : INCA122250																				
City PALM CITY	State FL	Zip Code 34990																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.50																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC OPS OFFICER																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00																					

Full Name (Last, First, Middle Initial) C. MR ALLEN SCHWARTZ		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>4</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	1	1	/	2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	1	1	/	2	0	1	3													
Mailing Address 9111 N KARLOV		Transaction ID : INCA122249																				
City SKOKIE	State IL	Zip Code 60076																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL PROD CONSULT																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00																					

SUBTOTAL of Receipts This Page (optional).....▶	184.42
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. MR JEFFREY SCOTT

Mailing Address 7330 EVEREST LANE - NORTH

City	State	Zip Code
MAPLE GROVE	MN	55311

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	VP/GM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2013

Transaction ID : INCA122330

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. MS MONICA SCOZZARE

Mailing Address 3021 E MILLCREEK ROAD

City	State	Zip Code
SALT LAKE CITY	UT	84109

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	VP CLINICAL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2013

Transaction ID : INCA122205

Amount of Each Receipt this Period
76.92

Full Name (Last, First, Middle Initial)
C. MR GEORGE SERPIKOV

Mailing Address 66 PROSPECT AVE

City	State	Zip Code
WESTWOOD	NJ	07675

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

Name of Employer	Occupation
MEDCO HEALTH SOLUTIONS	VP BUSINESS DEV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2013

Transaction ID : INCA122339

Amount of Each Receipt this Period
76.92

SUBTOTAL of Receipts This Page (optional).....▶	203.84
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 197 OF 209
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

A. MR JOHN SHEA
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 FRANKLIN TURNPIKE
 City ALLENDALE State NJ Zip Code 07401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation ASST COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122272
 Amount of Each Receipt this Period
 40.00

B. WENDELL SHERRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 748
 City COLLIERVILLE State TN Zip Code 38027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation DIR ACCDO CORP HR & TALENT MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122236
 Amount of Each Receipt this Period
 30.00

C. ANN SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 437 GLENDALE RD
 City WYCKOFF State NJ Zip Code 07481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PUBLIC AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2013
Transaction ID : INCA122219
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MS SUZANNE STREDNAK		Date of Receipt
Mailing Address 157 WATCHUNG DR		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
HAWTHORNE	NJ	07506
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122319
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR CLINICAL SVCS	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. MR MARK SULLIVAN		Date of Receipt
Mailing Address 16025 PINE VALE PL.		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDLOTHIAN	VA	23113
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122240
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	BUSINESS PROCESS SPECIALIST	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. MS MARY THORSBY		Date of Receipt
Mailing Address 17326 ELLEN DR		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
LIVONIA	MI	48152
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA122152
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR NATL ACCT EXEC	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="800.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MR JEFFREY TYLER		Date of Receipt
Mailing Address 37 KNOLL TERRACE		M M M / D D D / Y Y Y Y Y Y 04 / 11 / 2013
City	State	Zip Code
HAZLET	NJ	07730
FEC ID number of contributing federal political committee.		Transaction ID : INCA122181
C		Amount of Each Receipt this Period
		30.77
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR DIR TECHNOLOGY	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	246.16	

Full Name (Last, First, Middle Initial) B. MS CATHERINE WASSON		Date of Receipt
Mailing Address 3912 CALLE ANDALUCIA		M M M / D D D / Y Y Y Y Y Y 04 / 11 / 2013
City	State	Zip Code
SAN CLEMENTE	CA	92673
FEC ID number of contributing federal political committee.		Transaction ID : INCA122322
C		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP NATL ACCTS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	400.00	

Full Name (Last, First, Middle Initial) C. MR KENNETH WERMES		Date of Receipt
Mailing Address 26037 N WRANGLER RD		M M M / D D D / Y Y Y Y Y Y 04 / 11 / 2013
City	State	Zip Code
SCOTTSDALE	AZ	85255
FEC ID number of contributing federal political committee.		Transaction ID : INCA122257
C		Amount of Each Receipt this Period
		200.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SVP & GENERAL MGR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1600.00	

SUBTOTAL of Receipts This Page (optional).....▶	280.77
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 209
	<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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial) A. MRS ELISSA WOJTOWICZ RPH		Date of Receipt
Mailing Address 43 AZALEA PLACE		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
PISCATAWAY	NJ	08854
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA122233
MEDCO HEALTH SOLUTIONS	SR DIR RRA	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	<input type="text" value="30.00"/>

Full Name (Last, First, Middle Initial) B. MS JILL ZELMAN		Date of Receipt
Mailing Address 43604 EMERALD DUNES PL		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
LEESBURG	VA	20176
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA122171
MEDCO HEALTH SOLUTIONS	VP FINANCE	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	<input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) C. MR JAMES ZIRPOLI		Date of Receipt
Mailing Address 654 COPPER COVE CT		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
LOVELAND	OH	45140
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA122176
MEDCO HEALTH SOLUTIONS	SR DIR PHARM OPS	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="375.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="105.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="35189.62"/>

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 201 OF 209
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)
A. SCOTT BROWN FOR US SENATE COMMITTEE

Mailing Address 337 SUMMER STREET

City State Zip Code
 BOSTON MA 02210

FEC ID number of contributing federal political committee. **C** C00467233

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2013

Transaction ID : INCA122145

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
B. FRIENDS OF MAX BAUCUS

Mailing Address P. O. BOX 586

City State Zip Code
 HELENA MT 59624

FEC ID number of contributing federal political committee. **C** C00328211

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2013

Transaction ID : INCA122922

Amount of Each Receipt this Period
 3500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	6000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input 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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)

A. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, STE. 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2013

Transaction ID : EXPB121010

Amount of Each Disbursement this Period

88.00

Full Name (Last, First, Middle Initial)

B. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, STE. 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : EXPB121485

Amount of Each Disbursement this Period

198.50

Full Name (Last, First, Middle Initial)

C. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, STE. 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2013

Transaction ID : EXPB121932

Amount of Each Disbursement this Period

1202.67

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

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

1489.17

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input 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)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)

A. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, STE. 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB122919

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, STE. 1200

City State Zip Code
SACRAMENTO CA 95814

Purpose of Disbursement
LEGAL SERVICES & PAC ADMINISTRATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : EXPB122927

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)

A. BILL HASLAM FOR GOVERNOR 2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		04		2013

Mailing Address 1910 21ST AVENUE SOUTH

Transaction ID : EXPB120255

City Nashville State TN Zip Code 37212

Amount of Each Disbursement this Period

4500.00

Purpose of Disbursement

011
Category/Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

Full Name (Last, First, Middle Initial)

B. BO WATSON FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		04		2013

Mailing Address 1607 GUNSTON HALL ROAD

Transaction ID : EXPB120250

City HIXSON State TN Zip Code 37343

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

011
Category/Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR MCNALLY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		04		2013

Mailing Address 94 ROYAL TROON CIRCLE

Transaction ID : EXPB120252

City OAK RIDGE State TN Zip Code 37830

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

011
Category/Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

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

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

5500.00

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**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT REGINALD TATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		04		2013

Mailing Address 5330 BETHUNE COVE

Transaction ID : EXPB120253

City State Zip Code
MEMPHIS TN 37109

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

Full Name (Last, First, Middle Initial)

B. DAVID SHEPHERD FOR HOUSE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		04		2013

Mailing Address 204 MCCREARY HEIGHTS

Transaction ID : EXPB120251

City State Zip Code
Dickson TN 37055

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

Full Name (Last, First, Middle Initial)

C. FRIENDS OF STEVE MCMANUS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		04		2013

Mailing Address 405 RIVEREDGE DRIVE

Transaction ID : EXPB120254

City State Zip Code
Cordova TN 38018

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

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

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

1500.00

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**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)

A. NEW JOBS PAC

Mailing Address PO BOX 1600

City State Zip Code
Trenton NJ 08607

Purpose of Disbursement

011

Category/
Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	1	3

Transaction ID : EXPB121011

Amount of Each Disbursement this Period

7	2	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. ELECTION FUND OF TROY SINGLETON FOR ASSEMBLY

Mailing Address 907 MORGAN AVENUE

City State Zip Code
Palmyra NJ 08065

Purpose of Disbursement

011

Category/
Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	1	3

Transaction ID : EXPB121251

Amount of Each Disbursement this Period

6	0	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. BRAMNICK FOR ASSEMBLY

Mailing Address 279 WATCHUNG FORK

City State Zip Code
Westfield NJ 07090

Purpose of Disbursement

011

Category/
Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	1	3

Transaction ID : EXPB121483

Amount of Each Disbursement this Period

5	0	0	0	0	0
---	---	---	---	---	---

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

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

8	3	0	0	0	0
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7	2	0	0	0	0
---	---	---	---	---	---

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT SHEILA OLIVER

Mailing Address P.O. BOX 3540

City State Zip Code
CHERRY HILL NJ 08034

Purpose of Disbursement

011

Category/
Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2013

Transaction ID : EXPB121484

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. KEAN FOR SENATE

Mailing Address P.O. BOX 425

City State Zip Code
WESTFIELD NJ 07091

Purpose of Disbursement

011

Category/
Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2013

Transaction ID : EXPB121482

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. NELLIE POU FOR SENATE

Mailing Address P.O. BOX 2696

City State Zip Code
Paterson NJ 07509

Purpose of Disbursement

011

Category/
Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2013

Transaction ID : EXPB121481

Amount of Each Disbursement this Period

500.00

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

1500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)

A. SCOTT RUMANA ORGANIZATION ASSEMBLY

Mailing Address P.O. BOX 115

City State Zip Code
Cedar Knolls NJ 07927

Purpose of Disbursement

011

Category/
Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2013

Transaction ID : EXPB122144

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. 2014 FRIENDS OF JOHN DOAK

Mailing Address P.O. BOX 54825

City State Zip Code
Oklahoma City OK 73154

Purpose of Disbursement
VOID CHECK ORIGINALLY ISSUED 10/18/2012

011

Category/
Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: OK District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2013

Transaction ID : EXPB122343

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

C. 2014 FRIENDS OF JOHN DOAK

Mailing Address P.O. BOX 54825

City State Zip Code
Oklahoma City OK 73154

Purpose of Disbursement

011

Category/
Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: OK District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2013

Transaction ID : EXPB122344

Amount of Each Disbursement this Period

1000.00

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

600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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MEDCO HEALTH SOLUTIONS, INC. AND EXPRESS SCRIPTS, INC. POLITICAL ACTION COMMITTEE (AKA MEDCO-EXPRESS SCRIPTS PAC)

Full Name (Last, First, Middle Initial)

A. ELECTION FUND OF BETTYLOU DECROCE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2013

Mailing Address PO BOX 115

Transaction ID : EXPB122729

City State Zip Code
Cedar Knolls NJ 07927

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NJ District:

Full Name (Last, First, Middle Initial)

B. WEBBER FOR ASSEMBLY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2013

Mailing Address P.O. BOX 5076

Transaction ID : EXPB122925

City State Zip Code
PARSIPPANY NJ 07054

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NJ District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

1000.00

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

18400.00
