

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

ADDRESS (number and street) ONE POST STREET 32nd FLOOR  
 Check if different than previously reported. (ACC)  
SAN FRANCISCO CA 94104

2. **FEC IDENTIFICATION NUMBER** C00108035  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 02 01 2006 through 02 28 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer DAVID SCHINTZIUS

Signature of Treasurer Electronically Filed by DAVID SCHINTZIUS Date 03 06 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		138694.39
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	153719.65									
(c) Total Receipts (from Line 19) .....	9935.30	25046.62								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	163654.95	163741.01								
7. Total Disbursements (from Line 31) .....	21036.11	21122.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	142618.84	142618.84								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2639.02	5416.78
(i) Itemized (use Schedule A) .....	6857.74	18767.37
(ii) Unitemized .....	9496.76	24184.15
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9496.76	24184.15
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	438.54	862.47
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	9935.30	25046.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9935.30	25046.62

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	36.11	122.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	36.11	122.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21000.00	21000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	21036.11	21122.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	21036.11	21122.17

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	9496.76	24184.15
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9496.76	24184.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	36.11	122.17
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	36.11	122.17

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 15
	<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)  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Full Name (Last, First, Middle Initial) <b>A. Timothy Booth</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 1951 Brigance Cove		Transaction ID: 60306.C28362	
City State Zip Code Germantown TN 38139	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Mckesson Corporation	Occupation President	Payroll Deduction: (50.00- /Pay Period )	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Jeffery C. Campbell</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 2813 Buchanan St.		Transaction ID: 60306.C28458	
City State Zip Code San Francisco CA 94123	Amount of Each Receipt this Period 384.62		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Mckesson Corporation	Occupation Cfo & Evp	Payroll Deduction: (192.3- 1/Pay Period )	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 980.78		

Full Name (Last, First, Middle Initial) <b>C. Janeen Cook</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 615 Linkside Hollow		Transaction ID: 60306.C28395	
City State Zip Code Alpharetta GA 30005	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Mckesson Corporation	Occupation Vice President Marketing	Payroll Deduction: (50.00- /Pay Period )	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	584.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 15
	<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)  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Full Name (Last, First, Middle Initial) <b>A.</b> John Goforth		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6
Mailing Address 403 Farm Brook Cove		Transaction ID: 60306.C28388
City State Zip Code Woodstock GA 30188	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Mckesson Corporation	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		Payroll Deduction: (50.00- /Pay Period )

Full Name (Last, First, Middle Initial) <b>B.</b> John H. Hammergren		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6
Mailing Address 10 Winding Lane		Transaction ID: 60306.C28294
City State Zip Code Orinda CA 94563	Amount of Each Receipt this Period 384.62	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Mckesson Corporation	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 961.55	
		Payroll Deduction: (192.3- 1/Pay Period )

Full Name (Last, First, Middle Initial) <b>C.</b> Paul C. Julian		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6
Mailing Address 5127 Chelsea Drive		Transaction ID: 60306.C28280
City State Zip Code Martinez CA 94553	Amount of Each Receipt this Period 230.78	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Mckesson Corporation	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.95	
		Payroll Deduction: (115.3- 9/Pay Period )

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	715.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 15
	<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)  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Full Name (Last, First, Middle Initial) <b>A. Michael L. Kappel</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 1406 Wesley Walk, Nw		<b>Transaction ID: 60306.C28450</b>	
City State Zip Code Atlanta GA 30327	Amount of Each Receipt this Period 100.00		Receipt  Payroll Deduction: (50.00- /Pay Period )
FEC ID number of contributing federal political committee. <b>C</b>		Receipt  Payroll Deduction: (50.00- /Pay Period )	
Name of Employer Mckesson Corporation	Occupation Sr. Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Iver J Kern</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 3931 21st Street		<b>Transaction ID: 60306.C28268</b>	
City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 100.00		Receipt  Payroll Deduction: (50.00- /Pay Period )
FEC ID number of contributing federal political committee. <b>C</b>		Receipt  Payroll Deduction: (50.00- /Pay Period )	
Name of Employer Mckesson Corporation	Occupation Associate General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Jill Levenson-Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 15285 White Columns Drive		<b>Transaction ID: 60306.C28265</b>	
City State Zip Code Alpharetta GA 30004	Amount of Each Receipt this Period 100.00		Receipt  Payroll Deduction: (50.00- /Pay Period )
FEC ID number of contributing federal political committee. <b>C</b>		Receipt  Payroll Deduction: (50.00- /Pay Period )	
Name of Employer Mckesson Corporation	Occupation Vice President Sales Support		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 15
	<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)  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

**A.** Full Name (Last, First, Middle Initial)  
Nicholas A. Loiacono

Mailing Address P.o. Box 192953

City State Zip Code  
San Francisco CA 94119

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

Name of Employer Occupation  
Mckesson Corporation Vp - Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 60306.C28312

Amount of Each Receipt this Period  
100.00

Receipt

Payroll Deduction: (50.00- /Pay Period )

**B.** Full Name (Last, First, Middle Initial)  
Leonard Maisel

Mailing Address 13202 Vanessa Avenue

City State Zip Code  
Bowie MD 20721

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

Name of Employer Occupation  
Mckesson Corporation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 60306.C28266

Amount of Each Receipt this Period  
100.00

Receipt

Payroll Deduction: (50.00- /Pay Period )

**C.** Full Name (Last, First, Middle Initial)  
Ivan D. Meyerson

Mailing Address 1509 La Loma Avenue

City State Zip Code  
Berkley CA 94708

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

Name of Employer Occupation  
Mckesson Corporation Vp & General Council

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 437.50

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

Transaction ID: 60306.C28317

Amount of Each Receipt this Period  
175.00

Receipt

Payroll Deduction: (87.50- /Pay Period )

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 15
	<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)  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Full Name (Last, First, Middle Initial) <b>A. Jeremy K. Miller</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 234 Mohawk Drive		<b>Transaction ID: 60306.C28447</b>	
City State Zip Code Boulder CO 80303	Amount of Each Receipt this Period 160.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Mckesson Corporation	Occupation Vice President	Payroll Deduction: (80.00- /Pay Period )	
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>B. Marc E. Owen</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 51 James Avenue		<b>Transaction ID: 60306.C28364</b>	
City State Zip Code Atherton CA 94027	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Mckesson Corporation	Occupation Senior Vice President	Payroll Deduction: (50.00- /Pay Period )	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Pamela Pure</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 13165 Birmingham Highway		<b>Transaction ID: 60306.C28419</b>	
City State Zip Code Alpharetta GA 30005	Amount of Each Receipt this Period 154.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Mckesson Corporation	Occupation Group President	Payroll Deduction: (77.00- /Pay Period )	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	414.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

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NAME OF COMMITTEE (In Full)  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Full Name (Last, First, Middle Initial) <b>A. Sunny Sanyal</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 501 W. Halhalla Terrace		<b>Transaction ID: 60306.C28459</b>	
City State Zip Code Vernon Hills IL 60661	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Mckesson Corporation	Occupation Group President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		
		Payroll Deduction: (75.00- /Pay Period )	

Full Name (Last, First, Middle Initial) <b>B. Randall Spratt</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 2922 Ashbrooke Dr.		<b>Transaction ID: 60306.C28393</b>	
City State Zip Code Marietta GA 30068	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Mckesson Corporation	Occupation EVP, CIO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
		Payroll Deduction: (50.00- /Pay Period )	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	2639.02

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

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

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NAME OF COMMITTEE (In Full)  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

**A.** Full Name (Last, First, Middle Initial)  
Comerica Bank

Mailing Address P.O. Box 75000

City State Zip Code  
Detroit MI 48275-2250

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

Name of Employer Occupation  
Bank

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
862.47

Date of Receipt  
MM / DD / YYYY  
02 / 01 / 2006

Transaction ID: 60215.C27763

Amount of Each Receipt this Period  
438.54

Interest Received

NOTE:INTEREST INCOME

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	438.54
<b>TOTAL</b> This Period (last page this line number only) .....	▶	438.54

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Full Name (Last, First, Middle Initial) <b>A. Hoosiers Supporting Buyer For Congress</b>		<b>Transaction ID: 60306.E401</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6	
Mailing Address P.O. Box 712		Amount of Each Disbursement this Period 4000.00	
City Monticello State IN Zip Code 47960-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name STEVE CONGRESSMAN BUYER	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 04	DIRECT CONTRIBUTION		

Full Name (Last, First, Middle Initial) <b>B. Texans For Henry Cuellar Cong. Campaign</b>		<b>Transaction ID: 60306.E404</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 1519 Washington Street, Suite 200		Amount of Each Disbursement this Period 2000.00	
City Laredo State TX Zip Code 78042-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name HENRY R CUELLAR	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 28	DIRECT CONTRIBUTION		

Full Name (Last, First, Middle Initial) <b>C. Friends Of Patrick Kennedy</b>		<b>Transaction ID: 60306.E402</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6	
Mailing Address P.O. Box 321		Amount of Each Disbursement this Period 2000.00	
City Pawtucket State RI Zip Code 02862-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name PATRICK J KENNEDY	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 01	DIRECT CONTRIBUTION		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Full Name (Last, First, Middle Initial) <b>A. Price For Congress</b>		<b>Transaction ID:</b> 60306.E400 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 425		Amount of Each Disbursement this Period 4000.00  DIRECT CONTRIBUTION
City Roswell State GA Zip Code 30077-		
Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name THOMAS EDMUNDS MD PRICE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Rasmussen for US Senate</b>		<b>Transaction ID:</b> 60306.E403 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 306 West Chesapeake Avenue		Amount of Each Disbursement this Period 3000.00  DIRECT CONTRIBUTION
City Towson State MD Zip Code 21204-		
Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name DENNIS FRANCES RASMUSSEN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mike Ross For Congress Committee</b>		<b>Transaction ID:</b> 60306.E406 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address P.O Box 360		Amount of Each Disbursement this Period 1000.00  DIRECT CONTRIBUTION
City Prescott State AR Zip Code 71857-		
Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name MICHAEL AVERY ROSS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

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

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NAME OF COMMITTEE (In Full)  
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Full Name (Last, First, Middle Initial) <b>A. Mark Udall For Congress</b>		<b>Transaction ID:</b> 60306.E399 Date of Disbursement
Mailing Address 8690 Wolff Court Suite 200		<input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>
City Westminster	State CO	Zip Code 80031-
Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="3000.00"/>
Candidate Name MARK UDALL	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT CONTRIBUTION
State: CO	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Heather Wilson For Congress</b>		<b>Transaction ID:</b> 60306.E405 Date of Disbursement
Mailing Address P.O. Box 14070		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>
City Albuquerque	State NM	Zip Code 87191-
Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name HEATHER A. WILSON	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT CONTRIBUTION
State: NM	District: 01	

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

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