

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2012"/>		552435.89
(b) Cash on Hand at Beginning of Reporting Period.....	333856.00	
(c) Total Receipts (from Line 19)	7732.05	296397.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	341588.05	848832.95
7. Total Disbursements (from Line 31).....	3100.00	510344.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	338488.05	338488.05
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

FEC Form 3X (Rev. 06/2004)

Page 3

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: M M / D D / Y Y Y Y 10 / 01 / 2012 To: M M / D D / Y Y Y Y 10 / 17 / 2012

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).....	7476.71	203102.48
(ii) Unitemized	255.34	82179.17
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7732.05	285281.65
(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)	7732.05	285281.65
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	11000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	115.41
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))..... ▶	7732.05	296397.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7732.05	296397.06

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	0.00	2694.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2694.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	495500.00
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	3100.00	12150.00
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)) ..	3100.00	510344.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3100.00	510344.90

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)	7732.05	285281.65
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7732.05	285281.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	2694.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	2694.90

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 89
(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. MS MARIA ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 616 TROPICAL BREEZE WAY
 City TAMPA State FL Zip Code 33602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR CUST SVC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA119078
 Amount of Each Receipt this Period
 5.00

B. MS CARMEN BERG
 Full Name (Last, First, Middle Initial)
 Mailing Address P O BOX 1373
 City MEDICAL LAKE State WA Zip Code 99022
 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 ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA119135
 Amount of Each Receipt this Period
 12.50

C. MR ANDREW BIDINOTTO
 Full Name (Last, First, Middle Initial)
 Mailing Address 7728 GRACE DRIVE
 City NORTH RICHLAND HIL State TX Zip Code 76182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation BUSINESS PROCESS CHAMPION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 512.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA118997
 Amount of Each Receipt this Period
 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 7 OF 89
	<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 ▼ 1025.00

Date of Receipt 10 / 04 / 2012
Transaction ID : INCA119132
 Amount of Each Receipt this Period 25.00

B. MRS MARLENE CLEMENT
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 MESQUITE VILLAGE CIR
 City HENDERSON State NV Zip Code 89012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR CUST SVC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 512.50

Date of Receipt 10 / 04 / 2012
Transaction ID : INCA119076
 Amount of Each Receipt this Period 12.50

C. MS MICHELLE CULPEPPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 CARMELL CT
 City COLUMBUS State OH Zip Code 43228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 512.50

Date of Receipt 10 / 04 / 2012
Transaction ID : INCA119087
 Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 8 OF 89
	<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 TAMARA DIDYK
 Full Name (Last, First, Middle Initial)
 Mailing Address 136 BEAVER RUN RD
 City LAFAYETTE State NJ Zip Code 07848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR ENTERPRISE OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 512.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA119003
 Amount of Each Receipt this Period
 12.50

B. KELLY ELLIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 HENRY SEWALL WAY
 City STUART State FL Zip Code 34996
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LIBERTY MEDICAL Occupation SR DIR MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA119011
 Amount of Each Receipt this Period
 25.00

C. MARIBETH ENOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 BARNARD ROAD
 City WARWICK State RI Zip Code 02886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CRITICAL CARE SYSTEMS Occupation GENERAL MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA119040
 Amount of Each Receipt this Period
 5.00

SUBTOTAL of Receipts This Page (optional).....▶	42.50
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 9 OF 89
<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 JOHN FORD		Date of Receipt
Mailing Address 6 SILVER LAKE DRIVE		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City	State	Zip Code
SHAMONG	NJ	08088
FEC ID number of contributing federal political committee.		Transaction ID : INCA119127
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP/GM	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="615.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR ROBERT GIBBS		Date of Receipt
Mailing Address 544 DENMOOR COURT		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City	State	Zip Code
GALLOWAY	OH	43119
FEC ID number of contributing federal political committee.		Transaction ID : INCA119001
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="12.50"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	DIR ENTERPRISE OPS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="512.50"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. FRANK HARVEY		Date of Receipt
Mailing Address 154 SW PALM COVE DRIVE		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City	State	Zip Code
PALM CITY	FL	34990
FEC ID number of contributing federal political committee.		Transaction ID : INCA119013
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
LIBERTY MEDICAL	VP BUSINESS DEV	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="77.50"/>
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 10 OF 89
	<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 JOHN HOLLINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4986 TAUNTON WAY
 City COLUMBUS State OH Zip Code 43228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR BUSINESS PLANNING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 04 / 2012
Transaction ID : INCA118870
 Amount of Each Receipt this Period 10.00

B. LINDA ISHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1644 SE BALLANTRAE BLVD
 City PORT ST LUCIE State FL Zip Code 34952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LIBERTY MEDICAL Occupation DIR BUSINESS PLANNING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 04 / 2012
Transaction ID : INCA119014
 Amount of Each Receipt this Period 25.00

C. MR ERIC MCPHERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 15008 EAGLEPARK PL
 City LITHIA State FL Zip Code 33547
 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 ▼ 512.50

Date of Receipt 10 / 04 / 2012
Transaction ID : INCA119138
 Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 47.50
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: PAGE 11 OF 89
(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. PHILLIP MONACO
 Mailing Address 835 NE STOKES TERR
 City State Zip Code
 JENSEN BEACH FL 34957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LIBERTY MEDICAL DIR PHARMACY PRACTICES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA119012
 Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. MR BRYAN OLENIK
 Mailing Address 22212 N. 36TH ST
 City State Zip Code
 PHOENIX AZ 85050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR PHARM PRACTICE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 512.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA119136
 Amount of Each Receipt this Period
 12.50

Full Name (Last, First, Middle Initial)
C. MRS JENNIFER ROBERTS
 Mailing Address 1342 DALTON CT
 City State Zip Code
 FAIRFIELD OH 45014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR OPS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 512.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA119090
 Amount of Each Receipt this Period
 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 12 OF 89
	<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. CHRISTOPHER RYAN		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>04</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		04		2012
M M	/	D D	/	Y Y Y Y								
10		04		2012								
Mailing Address 7690 HUMMINGBIRD COURT		Transaction ID : INCA119022										
City WEST PALM BEACH	State FL	Zip Code 33412										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00											
Name of Employer LIBERTY MEDICAL	Occupation SR DIR NETWORK CONTRACTING											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00											

Full Name (Last, First, Middle Initial) B. MR ERIC SMITHER		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>04</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		04		2012
M M	/	D D	/	Y Y Y Y								
10		04		2012								
Mailing Address 1132 NORTH ST RT 123		Transaction ID : INCA119092										
City LEBANON	State OH	Zip Code 45036										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 12.50											
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 512.50											

Full Name (Last, First, Middle Initial) C. TIM TIDD		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>04</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		04		2012
M M	/	D D	/	Y Y Y Y								
10		04		2012								
Mailing Address 10302 S FEDERAL HWY PO BOX 266		Transaction ID : INCA119023										
City PORT ST LUCIE	State FL	Zip Code 34952										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00											
Name of Employer LIBERTY MEDICAL	Occupation VP ACCT SVCS											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00											

SUBTOTAL of Receipts This Page (optional).....▶	87.50
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: PAGE 13 OF 89
(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. GRETA WELEBOB
 Full Name (Last, First, Middle Initial)
 Mailing Address 1179 SW RIO VISTA WAY
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LIBERTY MEDICAL Occupation DIR MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA118973
 Amount of Each Receipt this Period
 25.00

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 VP/GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA119125
 Amount of Each Receipt this Period
 25.00

C. IVETTE ZUNIGA
 Full Name (Last, First, Middle Initial)
 Mailing Address 7571 163 RD COURT N.
 City PALM BEACH GARDENS State FL Zip Code 33418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LIBERTY MEDICAL Occupation SR DIR COMMERCIAL ECONOMICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : INCA119024
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 14 OF 89
	<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 LUCILLE ACCETTA		Date of Receipt
Mailing Address 11 ANDOVER CT		M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2012
City	State	Zip Code
CORTLANDT MANOR	NY	10567
FEC ID number of contributing federal political committee.		Transaction ID : INCA118947
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		125.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP CLINICAL SVCS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	525.00	

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 10 / 11 / 2012
City	State	Zip Code
WYCKOFF	NJ	07481
FEC ID number of contributing federal political committee.		Transaction ID : INCA118872
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) ▼	1050.00	

Full Name (Last, First, Middle Initial) C. MR STEPHEN ADLER		Date of Receipt
Mailing Address 139 BELLVALE LAKES RD		M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2012
City	State	Zip Code
WARWICK	NY	10990
FEC ID number of contributing federal political committee.		Transaction ID : INCA118931
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 INFO TECHNOLOGY	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1050.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 89
(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. MS KELLY AGNEW

Mailing Address 415 E. NORTH WATER STREET
 #902

City State Zip Code
 CHICAGO IL 60611

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS NATL ACCT EXEC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119099

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. JANET ALEXANDER

Mailing Address 32 WEST 83RD STREET
 APT #2

City State Zip Code
 NEW YORK NY 10024

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS NATL ACCT EXEC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 206.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119108

Amount of Each Receipt this Period
 0.50

Full Name (Last, First, Middle Initial)
C. MR JEFFREY ALEXANDER

Mailing Address 4 DEERPOND CT

City State Zip Code
 FLEMINGTON NJ 08822

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 ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118911

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.50

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: PAGE 16 OF 89
(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: 10 / 11 / 2012
Transaction ID : INCA118980
 Amount of Each Receipt this Period: 50.00
 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: 1050.00

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: 10 / 11 / 2012
Transaction ID : INCA118932
 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: 1050.00

C. MS MARIA ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 616 TROPICAL BREEZE WAY
 City TAMPA State FL Zip Code 33602
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA119079
 Amount of Each Receipt this Period: 5.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: DIR CUST SVC
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 205.00

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 17 OF 89
<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 EVAN ANDRICOPOULOS		Date of Receipt
Mailing Address 216 ARROWOOD WAY		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
BASKING RIDGE	NJ	07920
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA118891
MEDCO HEALTH SOLUTIONS	SR DIR BUSINESS REQUIREMENTS	
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="525.00"/>	<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) B. MS JAYME ANTONOPLOS		Date of Receipt
Mailing Address 48 WITTE ROAD		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
HEWITT	NJ	07421
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA118944
MEDCO HEALTH SOLUTIONS	DIR EXEC CORR	
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="525.00"/>	<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) C. WILLIAM AX		Date of Receipt
Mailing Address 1607 STODDARD ST		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
ROCKFORD	IL	61108
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA118993
ACCREDITO HEALTH GROUP	AVP SALES-HEMOPHILIA	
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="525.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
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 18 OF 89
(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 BARDZELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 189 FRANKLIN AVE
 City MIDLAND PARK State NJ Zip Code 07432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation TECHNICAL SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118881
 Amount of Each Receipt this Period 25.00

B. MS JOANNE BERARDINELLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 PAULINE DR
 City NUTLEY State NJ Zip Code 07110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118868
 Amount of Each Receipt this Period 10.00

C. MS MARYBETH BERENGUER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 WEXLER CT
 City GARNERVILLE State NY Zip Code 10923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118867
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 19 OF 89
(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. JEAN BERGWALL

Mailing Address 2546 HOLLYHOCK COVE

City State Zip Code
 GERMANTOWN TN 38138

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

Name of Employer Occupation
 ACCREDO HEALTH GROUP DIR PRODUCT LINE II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119033

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. MR CHRISTOPHER BERRY

Mailing Address 37-19 VICTORIA RD

City State Zip Code
 FAIR LAWN NJ 07410

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR TECHNOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119081

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. MR DAVID BERRY

Mailing Address 11 COBBLESTONE LANE

City State Zip Code
 RAMSEY NJ 07446

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR TECHNOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119082

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 20 OF 89
(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 ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118949
 Amount of Each Receipt this Period
 50.00

B. MS Eileen Bidell
 Full Name (Last, First, Middle Initial)
 Mailing Address 71 WASHINGTON CT.
 City TOWACO State NJ Zip Code 07082
 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 ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118906
 Amount of Each Receipt this Period
 25.00

C. MR Andrew Bidinotto
 Full Name (Last, First, Middle Initial)
 Mailing Address 7728 GRACE DRIVE
 City NORTH RICHLAND HIL State TX Zip Code 76182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation BUSINESS PROCESS CHAMPION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 512.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118998
 Amount of Each Receipt this Period
 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 87.50
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

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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. JAMES BLONDIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 AUBURN MEADOWS DR
 City FORISTELL State MO Zip Code 63348
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA119035
 Amount of Each Receipt this Period: 25.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: ACCREDO HEALTH GROUP Occupation: GENERAL MGR - MULTI BRANCH
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 525.00

B. MR MICHAEL BOGDA
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 LEONA CT
 City LEVITTOWN State NY Zip Code 11756
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA118918
 Amount of Each Receipt this Period: 25.00
 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: 525.00

C. MR DUANE BOSCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 3935 BALSAM LA
 City PLYMOUTH State MN Zip Code 55441
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA119071
 Amount of Each Receipt this Period: 10.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: DIR CLINICAL SVCS
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 210.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 22 OF 89
	<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="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
INDIANAPOLIS	IN	46278
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119133
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	DIR PHARM PRACTICE	<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="1025.00"/>	

Full Name (Last, First, Middle Initial) B. MR KEITH BRADBURY		Date of Receipt
Mailing Address 122 DERFUSS LN		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
BLAUVELT	NY	10913
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119020
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	EXEC DIR DRUG INFO	<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="525.00"/>	

Full Name (Last, First, Middle Initial) C. MR PAUL BRESSI		Date of Receipt
Mailing Address 45 ALDER DR		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
RAMSEY	NJ	07446
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118913
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR TECHNOLOGY	<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="525.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
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 23 OF 89
<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 LINDA BRIDGE		Date of Receipt
Mailing Address 136 BEECH ST		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
BELLEVILLE	NJ	07109
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA118972
MEDCO HEALTH SOLUTIONS	SR DIR MARKETING	
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="525.00"/>	<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) B. MR PAUL BRISSON		Date of Receipt
Mailing Address 133 Highbrook Avenue		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
PELHAM	NY	10803
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA118955
MEDCO HEALTH SOLUTIONS	DIR PRODUCT DEVELOPMENT	
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="525.00"/>	<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) C. STEVEN BROWN		Date of Receipt
Mailing Address 140 S GROVE PARK		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
MEMPHIS	TN	38117
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : INCA119032
ACCREDITO HEALTH GROUP	DIR PRODUCT LINE II	
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="525.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
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 24 OF 89
	<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)

Full Name (Last, First, Middle Initial) A. KAREN CALANDRO		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>10</td> <td></td> <td>11</td> <td></td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		11		2012
M M M	/	D D D	/	Y Y Y Y Y Y								
10		11		2012								
Mailing Address 306 FOREST LANE		Transaction ID : INCA118930										
City SCHAUMBURG	State IL	Zip Code 60139										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00											
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REG DIR ACCT MGMT											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00											

Full Name (Last, First, Middle Initial) B. MRS DOREEN CALDER		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>10</td> <td></td> <td>11</td> <td></td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		11		2012
M M M	/	D D D	/	Y Y Y Y Y Y								
10		11		2012								
Mailing Address 441 S ELM STREET		Transaction ID : INCA118954										
City MAYWOOD	State NJ	Zip Code 07607										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00											
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRODUCT DEVELOPMENT											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00											

Full Name (Last, First, Middle Initial) C. MS MELISSA CARR		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>10</td> <td></td> <td>11</td> <td></td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		11		2012
M M M	/	D D D	/	Y Y Y Y Y Y								
10		11		2012								
Mailing Address 8 BRIARCLIFF TERRACE		Transaction ID : INCA119021										
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 CHANNEL & GENERIC MKTING											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00											

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: PAGE 25 OF 89
(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. JOSEPH CASACCIA JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 9788 LIPSEY CV
 City GERMANTOWN State TN Zip Code 38139
 Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119134
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer ACCREDO HEALTH GROUP Occupation DIR PHARM PRACTICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 525.00

B. MS CATHERINE CASALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 16345 HEATHROW DRIVE
 City TAMPA State FL Zip Code 33647
 Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119110
 Amount of Each Receipt this Period 13.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR ACCT MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 273.00

C. MRS MARLENE CLEMENT
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 MESQUITE VILLAGE CIR
 City HENDERSON State NV Zip Code 89012
 Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119077
 Amount of Each Receipt this Period 12.50
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR CUST SVC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 512.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.50
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: PAGE 26 OF 89
(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 ▼
 588.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119028

Amount of Each Receipt this Period
 28.00

Full Name (Last, First, Middle Initial)
B. MS SUSAN COLUCCI

Mailing Address 703 SUCCASUNNA RD.

City State Zip Code
 LANDING NJ 07850

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR BUSINESS REQUIREMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118894

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. WILLIAM CONSIDINE

Mailing Address 130 WEST 67TH STREET, #4J

City State Zip Code
 NEW YORK NY 10023

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 ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118920

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.00

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 27 OF 89
	<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. JOHN CORBETT
 Full Name (Last, First, Middle Initial)
 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 ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119113
 Amount of Each Receipt this Period
 25.00

B. MS MICHELLE CULPEPPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 CARMELL CT
 City State Zip Code
 COLUMBUS OH 43228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR TECHNOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 512.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119088
 Amount of Each Receipt this Period
 12.50

C. MR ANGELO CUOZZO
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 IDA COURT
 City State Zip Code
 STATEN ISLAND NY 10312
 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 ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118915
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	62.50
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 28 OF 89
	<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 AJAY DALAL		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>10</td><td></td><td></td><td>11</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			11			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			11			2012																
Mailing Address 4603 NEWCASTLE DRIVE		Transaction ID : INCA119075																				
City FRISCO	State TX	Zip Code 75034																				
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 CLINICAL SVCS																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00																					

Full Name (Last, First, Middle Initial) B. MS CHRISTINE D'AQUINO		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>10</td><td></td><td></td><td>11</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			11			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			11			2012																
Mailing Address 3 CLIFTON PLACE		Transaction ID : INCA118957																				
City GLEN ROCK	State NJ	Zip Code 07452																				
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 PRODUCT DEVELOPMENT																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00																					

Full Name (Last, First, Middle Initial) C. WARREN DAVIS		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>10</td><td></td><td></td><td>11</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			11			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			11			2012																
Mailing Address 3131 SADDLEGAIT COVE		Transaction ID : INCA119046																				
City GERMANTOWN	State TN	Zip Code 38138																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.39																				
Name of Employer ACCREDITO HEALTH GROUP	Occupation VP STRATEGY & PRODUCT DEV																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1115.39																					

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 29 OF 89
(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 DAVISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 BENTLEY DRIVE
 City State Zip Code
 FRANKLIN LAKES NJ 07417
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA118968
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: SVP FINANCIAL PLANNING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 1050.00

B. MS KATHLEEN DEFABIIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 HUDSON AVE
 City State Zip Code
 WALDWICK NJ 07463
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA119094
 Amount of Each Receipt this Period: 25.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: DIR CLIENT SVC DELIVERY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 525.00

C. MR LUCA DEFLORENTIIS
 Full Name (Last, First, Middle Initial)
 Mailing Address N108 W7045 BERKSHIRE STREET
 City State Zip Code
 CEDARBURG WI 53012
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA118977
 Amount of Each Receipt this Period: 25.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: REGIONAL VP SYSTEMED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 525.00

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 30 OF 89
	<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. JUDITH DERRINGER		Date of Receipt
Mailing Address 3306 SHALLOW COVE COURT		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
CRESTWOOD	KY	40014
FEC ID number of contributing federal political committee.		Transaction ID : INCA119045
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
ACCREDO HEALTH GROUP	AVP SALES	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR FRANK DICALOGERO		Date of Receipt
Mailing Address 36 ARTHUR STREET		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
RIDGEFIELD PARK	NJ	07660
FEC ID number of contributing federal political committee.		Transaction ID : INCA118900
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	DIR FINANCE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS TAMARA DIDYK		Date of Receipt
Mailing Address 136 BEAVER RUN RD		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
LAFAYETTE	NJ	07848
FEC ID number of contributing federal political committee.		Transaction ID : INCA119004
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="12.50"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	DIR ENTERPRISE OPS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="512.50"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="62.50"/>
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 31 OF 89
(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 BENJAMIN DIMARCO

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 ▼ **735.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 11 / 2012
Transaction ID : INCA119112

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. MS MERIDITH DORNER

Mailing Address 8010 ORCHARD VIEW LANE

City FOGELSVILLE State PA Zip Code 18051

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation NATL ACCT EXEC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 11 / 2012
Transaction ID : INCA119100

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. MR PETER DUNLEAVY

Mailing Address 2 DECKER 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 FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 11 / 2012
Transaction ID : INCA118898

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **85.00**

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 32 OF 89
	<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="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
OVERLAND PARK	KS	66221
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118927
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="1050.00"/>	

Full Name (Last, First, Middle Initial) B. MS SUZANNE DURY		Date of Receipt
Mailing Address 147 MIDLAND AVE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
PARK RIDGE	NJ	07656
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118885
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	DIR BUSINESS REQUIREMENTS	<input type="text" value="0.50"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="206.50"/>	

Full Name (Last, First, Middle Initial) C. MS REBECCA DYER		Date of Receipt
Mailing Address 1400 POPLAR ESTATES PKY		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
GERMANTOWN	TN	38138
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118991
Name of Employer	Occupation	Amount of Each Receipt this Period
ACCREDITO HEALTH GROUP	DIR RN PERF MGMT & IMPROVEMENT	<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="525.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.50"/>
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 33 OF 89
	<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. MS JANET EDWARDS
 Full Name (Last, First, Middle Initial)
 Mailing Address N8W27837 WOODRIDGE LANE

City WAUKESHA	State WI	Zip Code 53188
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119074

Amount of Each Receipt this Period
25.00

B. MARIBETH ENOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 BARNARD ROAD

City WARWICK	State RI	Zip Code 02886
-----------------	-------------	-------------------

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

Name of Employer CRITICAL CARE SYSTEMS	Occupation GENERAL MGR
---	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119041

Amount of Each Receipt this Period
5.00

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 ▼ **1050.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118926

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 34 OF 89
(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. SUSAN FAUST
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 WEST BURLINGTON
 UNIT 501
 City LA GRANGE State IL Zip Code 60525
 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 ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118950
 Amount of Each Receipt this Period
 50.00

B. MS DAWN FELDNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 275 BIRCH STREET
 City EMERSON State NJ Zip Code 07630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR BUSINESS REQUIREMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118893
 Amount of Each Receipt this Period
 25.00

C. FORREST FERRARI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1170 SW LIGHTHOUSE DR
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PRODUCT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118960
 Amount of Each Receipt this Period
 60.00

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: PAGE 35 OF 89
(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 FERRAZZANO
 Full Name (Last, First, Middle Initial)
 Mailing Address 464 SPRING AVE.
 City RIDGEWOOD State NJ Zip Code 07450
 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 ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118916
 Amount of Each Receipt this Period
 25.00

B. RONALD FIELMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2061 ARLEEN CT
 City SCHAUMBURG State IL Zip Code 60194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation AVP SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119044
 Amount of Each Receipt this Period
 25.00

C. MR DON FISCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 TRACY CIRCLE
 City CAMPBELL HALL State NY Zip Code 10916
 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 ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118909
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 36 OF 89
	<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 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 ▼ 1057.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119015
 Amount of Each Receipt this Period
 57.70

B. MS THERESA FITCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 5650 GREAT NORTHERN BLVD #C2
 City NORTH OLMSTED State OH Zip Code 44070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119109
 Amount of Each Receipt this Period
 25.00

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 ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119128
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	97.70
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 37 OF 89
	<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 PAUL FORTUNATO III		Date of Receipt
Mailing Address 18 WINDING RIDGE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
OAKLAND	NJ	07436
FEC ID number of contributing federal political committee.		Transaction ID : INCA118860
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
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="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. KEVIN FRANCO		Date of Receipt
Mailing Address 287 FERRIS PLACE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
RIDGEWOOD	NJ	07450
FEC ID number of contributing federal political committee.		Transaction ID : INCA118904
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR DIR FINANCE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1050.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS PATRICIA GALLAGHER		Date of Receipt
Mailing Address 842 ASHLER CT		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
COLUMBUS	OH	43235
FEC ID number of contributing federal political committee.		Transaction ID : INCA119107
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	NATL ACCT EXEC	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
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 38 OF 89
(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 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 ▼
 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118869

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. MR OMHARAI SRIRAM GANGAIKONDAN-IYER

Mailing Address 9 CAIRNES ROAD

City State Zip Code
 MORRIS PLAINS NJ 07950

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR TECHNOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119086

Amount of Each Receipt this Period
 25.00

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 ▼
 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119124

Amount of Each Receipt this Period
 50.00

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 39 OF 89
	<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 ROBERT GIBBS		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>10</td> <td></td> <td>11</td> <td></td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		11		2012
M M M	/	D D D	/	Y Y Y Y Y Y								
10		11		2012								
Mailing Address 544 DENMOOR COURT		Transaction ID : INCA119002										
City GALLOWAY	State OH	Zip Code 43119										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.50										
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ENTERPRISE OPS											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 512.50											

Full Name (Last, First, Middle Initial) B. MR JONAH GITLITZ		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>10</td> <td></td> <td>11</td> <td></td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		11		2012
M M M	/	D D D	/	Y Y Y Y Y Y								
10		11		2012								
Mailing Address 43 OVERLOOK RIDGE		Transaction ID : INCA118858										
City OAKLAND	State NJ	Zip Code 07436										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00										
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 ▼ 364.00											

Full Name (Last, First, Middle Initial) C. MR PAUL GOERDT		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>10</td> <td></td> <td>11</td> <td></td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		11		2012
M M M	/	D D D	/	Y Y Y Y Y Y								
10		11		2012								
Mailing Address 1700 SUNRISE COURT		Transaction ID : INCA118948										
City BURNSVILLE	State MN	Zip Code 55306										
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 ▼ 1050.00											

SUBTOTAL of Receipts This Page (optional).....▶	63.50
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: PAGE 40 OF 89
(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 GOLDEN		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>1</td><td>0</td><td></td> <td>1</td><td>1</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	1		2	0	1	2
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	1		2	0	1	2													
Mailing Address 8702 CHELMSFORD LANE		Transaction ID : INCA119030																				
City SPRING	State TX	Zip Code 77379																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																				
Name of Employer ACCREDITO HEALTH GROUP	Occupation VP SALES																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00																					

Full Name (Last, First, Middle Initial) B. MR EDWARD GRIX		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>1</td><td>0</td><td></td> <td>1</td><td>1</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	1		2	0	1	2
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	1		2	0	1	2													
Mailing Address 525 ORANGEBURG RD		Transaction ID : INCA118889																				
City PEARL RIVER	State NY	Zip Code 10965																				
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 BUSINESS REQUIREMENTS																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00																					

Full Name (Last, First, Middle Initial) C. MS TRACY GRUNSFELD		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>1</td><td>0</td><td></td> <td>1</td><td>1</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	1		2	0	1	2
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	1		2	0	1	2													
Mailing Address 211 NORTH END AVENUE APT 3C		Transaction ID : INCA118971																				
City NEW YORK	State NY	Zip Code 10282																				
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 CONSUMER DRIVEN MKTS																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00																					

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 41 OF 89
(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. SHARON HARRIS
 Mailing Address 186 N. WHITE STATION RD
 City State Zip Code
 MEMPHIS TN 38117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ACCREDO HEALTH GROUP DIR HR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119038
 Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. MS SHANA HART
 Mailing Address 20 FAIR GREEN DRIVE
 City State Zip Code
 TROPHY CLUB TX 76262
 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 ▼
 1000.01

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118863
 Amount of Each Receipt this Period
 0.01

Full Name (Last, First, Middle Initial)
C. MR MARK HARTMANN
 Mailing Address 8980 KNOBLE COURT
 City State Zip Code
 EDEN PRAIRIE MN 55347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR ACCT MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118855
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.01
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 42 OF 89
(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 MARK HEGGESTAD
 Full Name (Last, First, Middle Initial)
 Mailing Address 13210 N. 11TH AVE.
 City PHOENIX State AZ Zip Code 85029
 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 ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119121
 Amount of Each Receipt this Period
 25.00

B. MS EILEEN HEINZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 DOGWOOD LN
 City MONTVALE State NJ Zip Code 07645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR BUSINESS DEV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118929
 Amount of Each Receipt this Period
 10.00

C. MR SCOTT HELMUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 VALLEY RD
 City SUCCASUNNA State NJ Zip Code 07876
 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 ▼ 765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118976
 Amount of Each Receipt this Period
 1.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 36.00
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 43 OF 89
	<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 JANE HILDEBRANDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 CASCADE WAY
 City BUTLER State NJ Zip Code 07405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR E-COM STRAT & DELIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119080
 Amount of Each Receipt this Period
 25.00

B. MR TIMOTHY HOGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 HIRLE ST
 City CORNWALL ON HUDSON State NY Zip Code 12520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation TECHNICAL SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118878
 Amount of Each Receipt this Period
 1.00

C. 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 ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119123
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 76.00
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 44 OF 89
(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 HOLLINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4986 TAUNTON WAY
 City COLUMBUS State OH Zip Code 43228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR BUSINESS PLANNING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118871
 Amount of Each Receipt this Period 100.00

B. MR MATTHEW HOLMES
 Full Name (Last, First, Middle Initial)
 Mailing Address 789 WESTON PARK DR
 City POWELL State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119104
 Amount of Each Receipt this Period 25.00

C. LYNN HOSTMYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6708 N.W. 112TH
 City OKLAHOMA CITY State OK Zip Code 73162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation GENERAL MGR - MULTI BRANCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119034
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 45 OF 89
(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 KIMBERLY HUMPHRIES
 Full Name (Last, First, Middle Initial)
 Mailing Address 10010 POINTE COVE
 City LAKELAND State TN Zip Code 38002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation VP REIMBURSEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119027
 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 ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118963
 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 ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118856
 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 46 OF 89
(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 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 ▼ 1050.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118857
 Amount of Each Receipt this Period 50.00

B. MS MICHELLE JAEGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 302 HERMAN TERRACE
 City HOPKINS State MN Zip Code 55343
 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 ▼ 1050.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118866
 Amount of Each Receipt this Period 50.00

C. 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 ▼ 735.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118974
 Amount of Each Receipt this Period 35.00

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 47 OF 89
	<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 JESELSON		Date of Receipt
Mailing Address 3270 KENNEY DR		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
GERMANTOWN	TN	38139
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119036
Name of Employer	Occupation	Amount of Each Receipt this Period
ACCREDO HEALTH GROUP	DIR NATIONAL DISPENSING OPERAT	<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="525.00"/>	

Full Name (Last, First, Middle Initial) B. ROBERT JINKS		Date of Receipt
Mailing Address 22 PAGE AVE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
LYNDHURST	NJ	07071
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118923
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP BUSINESS REQUIREMENTS	<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="1050.00"/>	

Full Name (Last, First, Middle Initial) C. MRS ANNE JOHNSTON		Date of Receipt
Mailing Address 700 S. HARBOUR ISLAND BLVD UNIT 432		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
TAMPA	FL	33602
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118992
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR INFO SERVICE CENTER	<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="525.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
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 48 OF 89
(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 ▼ 1575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118908
 Amount of Each Receipt this Period
 75.00

B. MR HECTOR JUST
 Full Name (Last, First, Middle Initial)
 Mailing Address 5329 BAYSHORE BLVD.
 City TAMPA State FL Zip Code 33611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR FACILITY PLANNING & DESIGN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118905
 Amount of Each Receipt this Period
 12.50

C. MS BECKY KAUS
 Full Name (Last, First, Middle Initial)
 Mailing Address N81 W18359 TOURS DR
 City MENOMONEE FALLS State WI Zip Code 53051
 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 ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119117
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 112.50
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 49 OF 89
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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. MR WILLIAM KEELER		Date of Receipt
Mailing Address 63 MOUNTAIN GLEN ROAD		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
RINGWOOD	NJ	07456
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118882
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	TECHNICAL SPECIALIST	<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="525.00"/>	

Full Name (Last, First, Middle Initial) B. MS MICHELLE KEHOE		Date of Receipt
Mailing Address 26-1 FARMHOUSE LANE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
MORRISTOWN	NJ	07960
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119006
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR INT'L MARKETS	<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="525.00"/>	

Full Name (Last, First, Middle Initial) C. MR WILLIAM KELLEY III		Date of Receipt
Mailing Address 1970 WOODLANDS PL		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
POWELL	OH	43065
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118945
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	GENERAL MGR GROUP	<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="1050.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
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 50 OF 89
(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 KARIN KLEINEGGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 CONKLING TOWN ROAD
 City State Zip Code
 CHESTER NY 10918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR ACCT MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118896
 Amount of Each Receipt this Period
 25.00

B. RICHARD KLUSOVSKY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 FAIRWOOD LANE
 City State Zip Code
 ACWORTH GA 30101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ACCREDO HEALTH GROUP AVP MANAGED CARE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119043
 Amount of Each Receipt this Period
 25.00

C. MR BRADFORD KOGEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 555 FORBUSH STREET
 City State Zip Code
 BOONTON NJ 07005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR CLIENT RETAIL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118941
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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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(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 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 ▼ 1050.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118859
 Amount of Each Receipt this Period 50.00

B. MS ANNE KRAFT
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 ROSEMILT PLACE
 City MORRISTOWN State NJ Zip Code 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR MARKET SEGMENT SOLUTIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118970
 Amount of Each Receipt this Period 25.00

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 ▼ 1300.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118874
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 OF 89
(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. MICHELE LAW
 Mailing Address 600 KINGFRED DR
 City NORTH HUNTINGDON State PA Zip Code 15642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation VP TRC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118990
 Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. PAUL LEAPO
 Mailing Address 1 CHRISTIAN DRIVE
 City EAST BRUNSWICK State NJ Zip Code 08816
 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 ▼ 546.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118919
 Amount of Each Receipt this Period
 26.00

Full Name (Last, First, Middle Initial)
C. EMMA LEVIN
 Mailing Address 18 SALEM RD
 City EAST BRUNSWICK State NJ Zip Code 08816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation TECHNICAL SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118884
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 76.00
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 53 OF 89
(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. MICHELLE LOTT

Mailing Address 232 EVERGREEN CT

City MOUNTAINSIDE State NJ Zip Code 07092

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PROJECT MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119095

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. ERICA MACK

Mailing Address 221 DELTA DRIVE

City MARION State AR Zip Code 72364

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

Name of Employer ACCREDO HEALTH GROUP Occupation DIR ENTERPRISE OPS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119005

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. MR MUDIT MAHESHWARI

Mailing Address 14 WATCHUNG TRL

City BRANCHBURG State NJ Zip Code 08876

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 ▼ **525.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118956

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **75.00**

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 54 OF 89
(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 MICHAEL MANDAGLIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 GREEN WAY
 City NEW PROVIDENCE State NJ Zip Code 07974
 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 ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118897
 Amount of Each Receipt this Period
 50.00

B. MRS COLLEEN MANLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 RIDGE ROAD
 City GLEN ROCK State NJ Zip Code 07452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR GENERIC STRAT & CUST DV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118975
 Amount of Each Receipt this Period
 10.00

C. MS ILENE MARCUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 97 BLUEBERRY DR
 City WOODCLIFF LAKE DR State NJ Zip Code 07675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118903
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 89
(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 GARY MARGIOTTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 HEATHER HILL WAY
 City MENDHAM State NJ Zip Code 07945
 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 ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119048
 Amount of Each Receipt this Period
 10.00

B. MR JOSEPH MARINELLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 351 SOUND BEACH AVENUE
 City OLD GREENWICH State CT Zip Code 06870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR MEDICARE OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118965
 Amount of Each Receipt this Period
 25.00

C. MRS SHELLY MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 9536 DOE MEADOW DR
 City GERMANTOWN State TN Zip Code 38139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation DIR HR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119039
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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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 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 WILLIAM MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2601 FOX HLL CIRCLE EAST
 City GERMANTOWN State TN Zip Code 38139
 Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119025
 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: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.93

B. MR EDWARD MARTINEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 SALTER PLACE
 City MAPLEWOOD State NJ Zip Code 07040
 Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118962
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR PRODUCT MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

C. MR THOMAS MCDONALD
 Full Name (Last, First, Middle Initial)
 Mailing Address 0-45 27TH ST
 City FAIR LAWN State NJ Zip Code 07410
 Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119083
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 126.93
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

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 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 WILLIAM MCLAUGHLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BATES CIRCLE
 City FLORIDA State NY Zip Code 10921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118940
 Amount of Each Receipt this Period
 25.00

B. MR ERIC MCPHERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 15008 EAGLEPARK PL
 City LITHIA State FL Zip Code 33547
 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 ▼ 512.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119139
 Amount of Each Receipt this Period
 12.50

C. MRS WENDY MELLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 5147 BLUE SPRUCE DR
 City YPSILANTI State MI Zip Code 48197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR MKTING & STRATEGIC ANAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118873
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 57.50
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: PAGE 58 OF 89
(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 LAURA MENVILLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 UNION HILL RD
 City MORRIS PLAINS State NJ Zip Code 07950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119084
 Amount of Each Receipt this Period
 10.00

B. DANETTE MEREDITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 W 2ND AVE
 City DERRY State PA Zip Code 15627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation VP SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119029
 Amount of Each Receipt this Period
 25.00

C. MR DAN MILKENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 826 DOWNING STREET
 City NORTHBROOK State IL Zip Code 60062
 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 ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119122
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 59 OF 89
	<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		Date of Receipt
Mailing Address 7 CLOVER LANE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
RANDOLPH	NJ	07869
FEC ID number of contributing federal political committee.		Transaction ID : INCA119130
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP LABOR RELATIONS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1050.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. EDDY MILLER		Date of Receipt
Mailing Address 99 POND AVENUE APT: 305		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
BROOKLINE	MA	02445
FEC ID number of contributing federal political committee.		Transaction ID : INCA118921
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
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="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR BHUPESH MISTRY		Date of Receipt
Mailing Address 9 BRIARWOOD CT		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
WHIPPANY	NJ	07981
FEC ID number of contributing federal political committee.		Transaction ID : INCA118876
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	TECHNICAL SPECIALIST	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
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 60 OF 89
	<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 PETER MONKHOUSE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1320 BRONCO CIR
 City WARRINGTON State PA Zip Code 18976
 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 ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118912
 Amount of Each Receipt this Period
 25.00

B. MR CRAIG MORRIS
 Full Name (Last, First, Middle Initial)
 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 ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118964
 Amount of Each Receipt this Period
 50.00

C. MR RICHARD MOUNTJOY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 STONEBRIDGE RD
 City SPARTA State NJ Zip Code 07871
 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 ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118864
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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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(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 PHILLIP MUELLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 16329 RIVERBIRCH DRIVE
 City MARYSVILLE State OH Zip Code 43040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR CLINICAL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119073
 Amount of Each Receipt this Period 25.00

B. MR ANDREW NANICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 LAUREL BAY DRIVE
 City MURRELLS INLET State SC Zip Code 29576
 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 ▼ 525.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119114
 Amount of Each Receipt this Period 25.00

C. MR CHARLES OESTREICHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 PARK DR SOUTH
 City RYE State NY Zip Code 10580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP CLIENT OPERATIONS SUPPORT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118981
 Amount of Each Receipt this Period 50.00

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 62 OF 89
	<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="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
RIDGEWOOD	NJ	07450
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119019
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="1057.70"/>	

Full Name (Last, First, Middle Initial) B. MR BRYAN OLENIK		Date of Receipt
Mailing Address 22212 N. 36TH ST		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
PHOENIX	AZ	85050
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119137
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	DIR PHARM PRACTICE	<input type="text" value="12.50"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="512.50"/>	

Full Name (Last, First, Middle Initial) C. MS CLAUDINE OLSEN		Date of Receipt
Mailing Address 4 HIGHGATE CT		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
SUFFERN	NY	10901
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119106
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	NATL ACCT EXEC	<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="525.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="95.20"/>
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 63 OF 89
(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. MS PATRICE OLSON

Mailing Address 9933 TOLEDO DRIVE NORTH

City State Zip Code
 BROOKLYN PARK MN 55443

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR ACCT MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118895

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. ALEXANDER ONIK

Mailing Address 1 SCHINDLER CT

City State Zip Code
 UPPER SADDLE RIVER NJ 07458

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR TECHNOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119089

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. MS NATALYA ONIK

Mailing Address 1 SCHINDLER CT

City State Zip Code
 UPPER SADDLE RIVER NJ 07458

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR BIAC SYSTEMS SOLUTIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118996

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 64 OF 89
(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)

A. MR RICHARD PAGANO
 Full Name (Last, First, Middle Initial)
 Mailing Address 185 PASCACK RD
 City State Zip Code
 PARK RIDGE NJ 07656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR BUSINESS REQUIREMENTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118892
 Amount of Each Receipt this Period
 25.00

B. JULIE PAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 417 BRITTANY DRIVE
 City State Zip Code
 WAYNE NJ 07470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS VP STRATEGIC MKT DEV
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118999
 Amount of Each Receipt this Period
 25.00

C. MR RICHARD PALOMBO
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 E. HOLLYWOOD LANE
 City State Zip Code
 BEESLEY'S POINT NJ 08223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR PHARMACY REGULATORY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118979
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 65 OF 89
(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 GIRA PATEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 FOXHILL RUN
 City MONMOUTH JUNCTION State NJ Zip Code 08852
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA118890
 Amount of Each Receipt this Period: 25.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: SR DIR BUSINESS REQUIREMENTS
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 525.00

B. JIMMY PERREN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1250 BRAY PARK DR EAST
 City COLLIERVILLE State TN Zip Code 38017
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA119026
 Amount of Each Receipt this Period: 75.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: ACCREDO HEALTH GROUP Occupation: VP REGULATORY COMPLIANCE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 1575.00

C. MR NATHAN PETERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1520 PEMBROKE PASS
 City CHANHASSEN State MN Zip Code 55317
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA119102
 Amount of Each Receipt this Period: 25.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: NATL ACCT EXEC
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 525.00

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 66 OF 89
	<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 PIERCE		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>10</td><td></td><td></td><td>11</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			11			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			11			2012																
Mailing Address 10297 E. LAKE DR.		Transaction ID : INCA119131																				
City ENGLEWOOD	State CO	Zip Code 80111																				
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 LABOR RELATIONS																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00																					

Full Name (Last, First, Middle Initial) B. DR PAGE PIGG		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>10</td><td></td><td></td><td>11</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			11			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			11			2012																
Mailing Address 9297 ANGLER TRL		Transaction ID : INCA119072																				
City MECHANICSVILLE	State VA	Zip Code 23116																				
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 CLINICAL SVCS																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00																					

Full Name (Last, First, Middle Initial) C. MS JANET PORAT		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>10</td><td></td><td></td><td>11</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			11			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			11			2012																
Mailing Address 5 CRABAPPLE CT		Transaction ID : INCA118910																				
City MONSEY	State NY	Zip Code 10952																				
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 TECHNOLOGY																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00																					

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: PAGE 67 OF 89
(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. BARBARA PROSSER

Mailing Address 8A HEMLOCK ROAD

City State Zip Code
 COLUMBIA NJ 07832

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

Name of Employer Occupation
 CRITICAL CARE SYSTEMS VP CLINICAL MGMT & SVCS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118982

Amount of Each Receipt this Period
 25.00

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

Mailing Address 318 NEWBURY DRIVE

City State Zip Code
 MONROEVILLE PA 15146

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR BUSINESS DEV

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118928

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. SYED QUADRI

Mailing Address 6040 KENNEDY BLVD EAST
 APT 30N

City State Zip Code
 WEST NEW YORK NJ 07093

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR PRIVACY

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118942

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 68 OF 89
	<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 FRANCES RAO
 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 PRIVACY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118943
 Amount of Each Receipt this Period
 75.00

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 ▼ 227.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119120
 Amount of Each Receipt this Period
 77.00

C. MS MARGARET REICHENBACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 26 UNDERWOOD DR
 City WEST ORANGE State NJ Zip Code 07052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118939
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	177.00
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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 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 HEATHER REIGLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10816 BARBADOS ISLE DRIVE
 City TAMPA State FL Zip Code 33647
 Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119142
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR CUST SVC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 525.00

B. MR JOSEPH REYNOLDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 6308 HILLTOP COURT
 City FORT LEE State NJ Zip Code 07024
 Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118924
 Amount of Each Receipt this Period 70.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP BUSINESS REQUIREMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 1470.00

C. MR WILLIAM RINCON
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 CLINTON VIEW TERRACE
 City HEWITT State NJ Zip Code 07421
 Date of Receipt 10 / 11 / 2012
Transaction ID : INCA118961
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR PROJECT MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 525.00

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

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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. ELIZABETH RITCHIE

Mailing Address 27 DAY RD

City Pleasant Valley State CT Zip Code 06063

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR MARKET STRATEGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118925

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. MR DAVID ROBARGE

Mailing Address 4565 QUEENSLAND LN N

City Minneapolis State MN Zip Code 55446

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 ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119115

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. MRS JENNIFER ROBERTS

Mailing Address 1342 DALTON CT

City Fairfield State OH Zip Code 45014

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

Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR OPS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 512.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119091

Amount of Each Receipt this Period
 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 87.50

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 71 OF 89
<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
Mailing Address 7 RED OAK LANE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
KINNELON	NJ	07405
FEC ID number of contributing federal political committee.		Transaction ID : INCA118937
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="1050.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR CHRISTOPHERJOHN ROWLAND		Date of Receipt
Mailing Address 16725 OLIVE CIRCLE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
FOUNTAIN VALLEY	CA	92708
FEC ID number of contributing federal political committee.		Transaction ID : INCA119098
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	NATL ACCT EXEC	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MISS CYNTHIA RYLANDS		Date of Receipt
Mailing Address 4836 MIDDLE RD		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
ALLISON PARK	PA	15101
FEC ID number of contributing federal political committee.		Transaction ID : INCA118886
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	DIR BUSINESS REQUIREMENTS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
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. MRS SARA SABIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 133 MOUNTAIN ROAD
 City State Zip Code
 CORNWALL-ON-HUDSON NY 12520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS NATL ACCT EXEC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119103
 Amount of Each Receipt this Period
 25.00

B. MS BETH SAVARE
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 JONES LN
 City State Zip Code
 BLAIRSTOWN NJ 07825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR PHARM OPS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118907
 Amount of Each Receipt this Period
 25.00

C. MR MITCHELL SCHERF
 Full Name (Last, First, Middle Initial)
 Mailing Address 739 CAMBERWELL DR
 City State Zip Code
 EAGAN MN 55123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS NATL ACCT EXEC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119101
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 73 OF 89
(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. 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 ▼ 407.63

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119010
 Amount of Each Receipt this Period
 57.50

Full Name (Last, First, Middle Initial)
B. ERIC SCHUPP
 Mailing Address 340 S. MAIN
 City MEMPHIS State TN Zip Code 38103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation DIR PRODUCT LINE II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119031
 Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. 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 ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119009
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 132.50
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 74 OF 89
	<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 SCOTT
 Full Name (Last, First, Middle Initial)
 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 ▼
 1050.00

Date of Receipt
 10 / 11 / 2012
Transaction ID : INCA119129

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 ▼
 1057.70

Date of Receipt
 10 / 11 / 2012
Transaction ID : INCA118946

Amount of Each Receipt this Period
 57.70

C. 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 ▼
 840.00

Date of Receipt
 10 / 11 / 2012
Transaction ID : INCA119047

Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional).....	147.70
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 75 OF 89
(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 State Zip Code
 COLLIERVILLE TN 38027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ACCREDO HEALTH GROUP DIR ACCDO CORP HR & TALENT MGT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118989
 Amount of Each Receipt this Period
 30.00

B. MR JAMES SHIVAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 PROSPECT AVE
 City State Zip Code
 NORTH ARLINGTON NJ 07031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ACCREDO HEALTH GROUP DIR PRICING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119037
 Amount of Each Receipt this Period
 25.00

C. MR JOHN SISTO
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 MAYBERRY LANE
 City State Zip Code
 MECHANICSBURG PA 17050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR PHARMACY REGULATORY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118978
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 76 OF 89
	<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 SKRIPATA		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>10</td><td></td><td></td><td>11</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			11			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			11			2012																
Mailing Address 70 RIVER ROAD UNIT D9		Transaction ID : INCA118880																				
City CLIFTON	State NJ	Zip Code 07014																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 87.50																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00																					

Full Name (Last, First, Middle Initial) B. 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>10</td><td></td><td></td><td>11</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			11			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			11			2012																
Mailing Address 437 GLENDALE RD		Transaction ID : INCA118969																				
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 ▼ 1050.00																					

Full Name (Last, First, Middle Initial) C. MR ERIC SMITHER		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>10</td><td></td><td></td><td>11</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			11			2012			
M	M	/	D	D	/	Y	Y	Y	Y													
10			11			2012																
Mailing Address 1132 NORTH ST RT 123		Transaction ID : INCA119093																				
City LEBANON	State OH	Zip Code 45036																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.50																				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 512.50																					

SUBTOTAL of Receipts This Page (optional).....▶	87.50
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: PAGE 77 OF 89
(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. BRENDA STAFFORD

Mailing Address **647 BERKELEY AVENUE**

City State Zip Code
ORANGE NJ 07050

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

Name of Employer Occupation
MEDCO HEALTH SOLUTIONS ASST COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
10 / 11 / 2012

Transaction ID : INCA119049

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. MR RALPH STAIANO

Mailing Address **1 LAMBROS DRIVE**

City State Zip Code
MONROE NY 10950

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

Name of Employer Occupation
MEDCO HEALTH SOLUTIONS SR DIR BUSINESS REQUIREMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
10 / 11 / 2012

Transaction ID : INCA118888

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. MS JILL STEARNS

Mailing Address **13130 HALSELL DR**

City State Zip Code
AUSTIN TX 78732

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 ▼
1050.00

Date of Receipt
10 / 11 / 2012

Transaction ID : INCA118865

Amount of Each Receipt this Period
50.00

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: PAGE 78 OF 89
(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 LEAH STERMAN-KABRT
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 OAK PL
 City NORTH CALDWELL State NJ Zip Code 07006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation TECHNICAL SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118879
 Amount of Each Receipt this Period
 25.00

B. MS JANNA STOUL
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 APACHE WAY
 City MONTVILLE State NJ Zip Code 07045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation EXEC DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118938
 Amount of Each Receipt this Period
 25.00

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 ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119116
 Amount of Each Receipt this Period
 50.00

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 79 OF 89
	<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 PATRICIA STRETE		Date of Receipt
Mailing Address 9930 FOREST AVENUE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
LAKEVIEW	OH	43331
FEC ID number of contributing federal political committee.		Transaction ID : INCA118934
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	SR DIR CLINICAL THERAPEUTICS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MILAYNA SUBAR MD		Date of Receipt
Mailing Address 11 RIVERSIDE DRIVE #8CE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
NEW YORK	NY	10023
FEC ID number of contributing federal political committee.		Transaction ID : INCA118985
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	VP NATIONAL PRACTICE LEADER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1050.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS COLEEN SULLIVAN		Date of Receipt
Mailing Address 38 BARKMILL TERRACE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
MONTVILLE	NJ	07045
FEC ID number of contributing federal political committee.		Transaction ID : INCA118917
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
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="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
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 89
	<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 MARK SULLIVAN		Date of Receipt
Mailing Address 16025 PINE VALE PL.		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
MIDLOTHIAN	VA	23113
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118995
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="1050.00"/>	

Full Name (Last, First, Middle Initial) B. MARK TANKERSLEY		Date of Receipt
Mailing Address 1374 SAWMILL CREEK LANE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
CORDOVA	TN	38018
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119042
Name of Employer	Occupation	Amount of Each Receipt this Period
ACCREDO HEALTH GROUP	DIR MEDICAL INFORMATICS	<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="630.00"/>	

Full Name (Last, First, Middle Initial) C. MR BOOBALAN THANGAVELU		Date of Receipt
Mailing Address 2 SNEAD COURT		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
FLANDERS	NJ	07836
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118883
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	TECHNICAL SPECIALIST	<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="525.00"/>	

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 81 OF 89
	<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 MELISSA THOMET		Date of Receipt
Mailing Address 721 HINMAN AVE #1E		M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2012
City	State	Zip Code
EVANSTON	IL	60202
FEC ID number of contributing federal political committee.		Transaction ID : INCA118986
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 ACCT MGMT OPS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	525.00	

Full Name (Last, First, Middle Initial) B. MS MARY THORSBY		Date of Receipt
Mailing Address 17326 ELLEN DR		M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2012
City	State	Zip Code
LIVONIA	MI	48152
FEC ID number of contributing federal political committee.		Transaction ID : INCA118862
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		100.00
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) ▼	2100.00	

Full Name (Last, First, Middle Initial) C. MRS CHINNERETH TORRACA		Date of Receipt
Mailing Address 95 ERNST AVENUE		M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2012
City	State	Zip Code
BLOOMFIELD	NJ	07003
FEC ID number of contributing federal political committee.		Transaction ID : INCA118933
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		25.00
Name of Employer	Occupation	
MEDCO HEALTH SOLUTIONS	DIR CLIENT REQUIREMENTS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	525.00	

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 82 OF 89
(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 DAVID TRICE
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 BRADFORD DR.
 City SCHWENKSVILLE State PA Zip Code 19473
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA118875
 Amount of Each Receipt this Period: 25.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: TECHNICAL SPECIALIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 525.00

B. MR JEFFREY TYLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 KNOLL TERRACE
 City HAZLET State NJ Zip Code 07730
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA118914
 Amount of Each Receipt this Period: 30.77
 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: 646.17

C. MRS JENNIFER UTTERDYKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1881 GREENTREE ROAD
 City LEBANON State OH Zip Code 45036
 Date of Receipt: 10 / 11 / 2012
Transaction ID : INCA119000
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MEDCO HEALTH SOLUTIONS Occupation: DIR MEDICATION SAFETY/QUALITY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 1050.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.77
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 83 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. MRS JEANNINE VANKLEECK		Date of Receipt
Mailing Address 56 ZIMMER AVENUE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
MIDLAND PARK	NJ	07432
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119016
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	DIR FINANCIAL APPLICATIONS	<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="525.00"/>	

Full Name (Last, First, Middle Initial) B. MR WIL VELARDE		Date of Receipt
Mailing Address 443 WEST SADDLE RIVER RD		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
UPPER SADDLE RIVER	NJ	07458
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118959
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR PRODUCT	<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="630.00"/>	

Full Name (Last, First, Middle Initial) C. MR GORDON VICKERS		Date of Receipt
Mailing Address 436 MOUNTAIN AVENUE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
WESTFIELD	NJ	07090
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119097
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	NATL ACCT EXEC	<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="525.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="80.00"/>
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 84 OF 89
(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 MUNISH VIJ
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 BOULDER TRAIL
 City MAHWAH State NJ Zip Code 07430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119085
 Amount of Each Receipt this Period
 25.00

B. MR MICHAEL WAIBEL
 Full Name (Last, First, Middle Initial)
 Mailing Address N48 W16381 LONE OAK LN
 City MENOMONEE FALLS State WI Zip Code 53051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR ACCT MGMT OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118987
 Amount of Each Receipt this Period
 15.00

C. LYNETTE WASHINGTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4272 MELWOOD OAK DR
 City LAKELAND State TN Zip Code 38002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACCREDO HEALTH GROUP Occupation SR DIR ENTERPRISE OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119008
 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 85 OF 89
(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 ▼ 1050.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119119
 Amount of Each Receipt this Period 50.00

B. MS DONNA WEATHERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1043 BELL STREET
 City EDMONDS State WA Zip Code 98020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCO HEALTH SOLUTIONS Occupation NATL ACCT EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119105
 Amount of Each Receipt this Period 10.00

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 ▼ 4200.00

Date of Receipt 10 / 11 / 2012
Transaction ID : INCA119018
 Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 260.00
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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(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 TAMARA WHITLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5847 CLENDENIN AVE
 City State Zip Code
 DALLAS TX 75228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ACCREDO HEALTH GROUP SR DIR BUSINESS REQUIREMENTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118887
 Amount of Each Receipt this Period
 25.00

B. MR STEPHEN WILKINS SR
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 PARKER OAKS LN
 City State Zip Code
 HUDSON OAKS TX 76087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR BUSINESS PLANNING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA119070
 Amount of Each Receipt this Period
 0.01

C. MS COLETTE WILSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 16608 56TH PL W
 City State Zip Code
 LYNNWOOD WA 98037
 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 ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2012
Transaction ID : INCA118861
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.01
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 89
(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. JAMES WINTRAUB

Mailing Address 2166 BROADWAY APT 8F

City State Zip Code
 NEW YORK NY 10024

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR CREATIVE DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118952

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. MRS ELISSA WOJTOWICZ RPH

Mailing Address 43 AZALEA PLACE

City State Zip Code
 PISCATAWAY NJ 08854

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS SR DIR RRA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA118984

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
C. MS CYNTHIA WOOD

Mailing Address 4002 FALCON LAKE DR

City State Zip Code
 ARLINGTON TX 76016

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

Name of Employer Occupation
 MEDCO HEALTH SOLUTIONS DIR PROFESS PRACTICES POLICIES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : INCA119007

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00

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 88 OF 89
<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 JUDITH WOOD		Date of Receipt
Mailing Address 76 COLONIAL ROAD		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
STILLWATER	NY	12170
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118988
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	SR DIR ACCT MGMT OPS	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="330.00"/>	

Full Name (Last, First, Middle Initial) B. MS JILL ZELMAN		Date of Receipt
Mailing Address 43604 EMERALD DUNES PL		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
LEESBURG	VA	20176
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA118899
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="1050.00"/>	

Full Name (Last, First, Middle Initial) C. MR JAMES ZIRPOLI		Date of Receipt
Mailing Address 654 COPPER COVE CT		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
LOVELAND	OH	45140
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA119126
Name of Employer	Occupation	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS	VP/GM	<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="1025.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="85.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="7476.71"/>

**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. ELECTION FUND OF TROY SINGLETON FOR ASSEMBLY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2012

Mailing Address 907 MORGAN AVENUE

Transaction ID : EXPB118851

City Palmyra State NJ Zip Code 08065

Amount of Each Disbursement this Period

1000.00

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. SCOTT RUMANA ORGANIZATION ASSEMBLY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2012

Mailing Address P.O. BOX 115

Transaction ID : EXPB118852

City Cedar Knolls State NJ Zip Code 07927

Amount of Each Disbursement this Period

600.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

NON-FEDERAL CONTRIBUTION

Office Sought: House Senate President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. ELECTION FUND OF SENATOR JOSEPH VITALE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		10		2012

Mailing Address P.O. BOX 1467

Transaction ID : EXPB118854

City WOODBRIDGE State NJ Zip Code 07095

Amount of Each Disbursement this Period

1500.00

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:

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

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

3100.00

3100.00
