

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 06 01 2008 through 06 30 2008

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

Type or Print Name of Treasurer Teri Hartlage

Signature of Treasurer Electronically Filed by Teri Hartlage Date 07 10 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		91665.60
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	94995.26									
(c) Total Receipts (from Line 19) .....	1779.91	10109.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	96775.17	101775.17								
7. Total Disbursements (from Line 31) .....	1000.00	6000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	95775.17	95775.17								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	1428.83	3277.27
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	351.08	6832.30
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1779.91	10109.57
(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) .....	1779.91	10109.57
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1779.91	10109.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1779.91	10109.57

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	6000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1000.00	6000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000.00	6000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	1779.91	10109.57
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1779.91	10109.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Andrews		Date of Receipt
	Mailing Address 24712 231st Ave SE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 27 / 2008
	City	State	Zip Code
	Maple Valley	WA	98038
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 062708-4
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.19
		<input type="text"/> 201.90	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Ashy		Date of Receipt
	Mailing Address 4406 Effie St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 06 / 2008
	City	State	Zip Code
	Bellaire	TX	77401
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 060608-32
Name of Employer Pharmerica		Occupation Director, Process Improvement	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.19
		<input type="text"/> 222.09	

<b>C.</b>	Full Name (Last, First, Middle Initial) Charles Ashy		Date of Receipt
	Mailing Address 4406 Effie St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 20 / 2008
	City	State	Zip Code
	Bellaire	TX	77401
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 062008-32
Name of Employer Pharmerica		Occupation Director, Process Improvement	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.19
		<input type="text"/> 222.09	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 23  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Anthony Astore</p> <p>Mailing Address 7 Hempstead Road</p> <p>City State Zip Code Trenton NJ 08610</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation PharMerica Consultant Pharmacist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">275.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 06 / 2008</span></p> <p><b>Transaction ID:</b> 060608-6</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Anthony Astore</p> <p>Mailing Address 7 Hempstead Road</p> <p>City State Zip Code Trenton NJ 08610</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation PharMerica Consultant Pharmacist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">275.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 20 / 2008</span></p> <p><b>Transaction ID:</b> 062008-6</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Tracy Atkinson</p> <p>Mailing Address 22 Evening Star Lp</p> <p>City State Zip Code Edgewood NM 87015</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation PharMerica Manager, General</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">275.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 06 / 2008</span></p> <p><b>Transaction ID:</b> 060608-31</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">75.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 23  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Tracy Atkinson

Mailing Address 22 Evening Star Lp

City Edgewood State NM Zip Code 87015

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** 062008-31

Amount of Each Receipt this Period: 25.00

**B.**

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

Mailing Address 2432 Atchison Ave

City Lawrence State KS Zip Code 66047

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

Name of Employer Pharmerica Occupation Lead Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** 060608-28

Amount of Each Receipt this Period: 25.00

**C.**

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

Mailing Address 2432 Atchison Ave

City Lawrence State KS Zip Code 66047

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

Name of Employer Pharmerica Occupation Lead Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** 062008-28

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 9 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Hill Boyett		Date of Receipt
	Mailing Address 137 Tatershall		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Macon	GA	31210
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 062708-2
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.19"/>
		<input type="text" value="201.90"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) David Cole		Date of Receipt
	Mailing Address 1213 Augusta Drive		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Shelbyville	KY	40065
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 061308-6
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
		<input type="text" value="250.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) David Cole		Date of Receipt
	Mailing Address 1213 Augusta Drive		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Shelbyville	KY	40065
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 062708-6
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
		<input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="70.19"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 23  
(check only one)

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

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

**A.**

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

Mailing Address 2711 Gulf Drive

City State Zip Code  
Holmes Beach FL 34217

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

Name of Employer Occupation  
Pharmerica Director, Regional Reimbursement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.09

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** 060608-9

Amount of Each Receipt this Period  
20.19

**B.**

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

Mailing Address 2711 Gulf Drive

City State Zip Code  
Holmes Beach FL 34217

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

Name of Employer Occupation  
Pharmerica Director, Regional Reimbursement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.09

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** 062008-8

Amount of Each Receipt this Period  
20.19

**C.**

Full Name (Last, First, Middle Initial)  
Todd Dipprey

Mailing Address 1401 7th

City State Zip Code  
Shallowater TX 79363

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.09

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** 060608-21

Amount of Each Receipt this Period  
20.19

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 23  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Todd Dipprey

Mailing Address 1401 7th

City State Zip Code  
Shallowater TX 79363

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** 062008-21

Amount of Each Receipt this Period  
20.19

**B.**

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

Mailing Address 12236 Juniper

City State Zip Code  
Overland Park KS 66209

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** 060608-26

Amount of Each Receipt this Period  
20.19

**C.**

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

Mailing Address 12236 Juniper

City State Zip Code  
Overland Park KS 66209

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** 062008-26

Amount of Each Receipt this Period  
20.19

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher G. Flori	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 2011 Frankfort Avenue # 209	<b>Transaction ID:</b> 060608-5
	City State Zip Code Louisville KY 40206	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation PharMerica Vice President, Product Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Christopher G. Flori	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 2011 Frankfort Avenue # 209	<b>Transaction ID:</b> 062008-5
	City State Zip Code Louisville KY 40206	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation PharMerica Vice President, Product Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Linda K. Gelalia	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 9539 Norchester Cir	<b>Transaction ID:</b> 060608-13
	City State Zip Code Tampa FL 33647	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation PharMerica Director, Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>125.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 13 / 23  
(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)  
PharMerica Corporation Political Action Committee PPAC

**A.** Full Name (Last, First, Middle Initial)  
Linda K. Gelalia  
 Mailing Address 9539 Norchester Cir  
 City Tampa State FL Zip Code 33647  
 Date of Receipt 06 / 20 / 2008  
**Transaction ID: 062008-13**  
 Amount of Each Receipt this Period 25.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PharMerica Occupation Director, Process Improvement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 275.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas Griffin  
 Mailing Address 10903 Ledgement Ln  
 City Windermere State FL Zip Code 34786  
 Date of Receipt 06 / 06 / 2008  
**Transaction ID: 060608-19**  
 Amount of Each Receipt this Period 25.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pharmacia Occupation Manager, General  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 275.00

**C.** Full Name (Last, First, Middle Initial)  
Thomas Griffin  
 Mailing Address 10903 Ledgement Ln  
 City Windermere State FL Zip Code 34786  
 Date of Receipt 06 / 20 / 2008  
**Transaction ID: 062008-19**  
 Amount of Each Receipt this Period 25.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pharmacia Occupation Manager, General  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 275.00

**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 14 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 4021 Audubon Drive

City State Zip Code  
Largo FL 33771

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** 060608-12

Amount of Each Receipt this Period  
25.00

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

Mailing Address 4021 Audubon Drive

City State Zip Code  
Largo FL 33771

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** 062008-12

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Mark Kirasich

Mailing Address 7185 Crystal View Dr Se

City State Zip Code  
Caleoonia MI 49316

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.90

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2008

**Transaction ID:** 062708-3

Amount of Each Receipt this Period  
20.19

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 23  
(check only one)

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

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

**A.**

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

Mailing Address 2928 Falls

City State Zip Code  
Rapid City SD 57702

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

Name of Employer: Pharmerica  
Occupation: Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** 060608-24

Amount of Each Receipt this Period  
25.00

**B.**

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

Mailing Address 2928 Falls

City State Zip Code  
Rapid City SD 57702

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

Name of Employer: Pharmerica  
Occupation: Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** 062008-24

Amount of Each Receipt this Period  
25.00

**C.**

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

Mailing Address 1310 Jersey Ave N

City State Zip Code  
Golden Valley MN 55427

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

Name of Employer: Pharmerica  
Occupation: Pharmacy Ops Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2008

**Transaction ID:** 062708-8

Amount of Each Receipt this Period  
21.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **71.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 23  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
PharMerica Corporation Political Action Committee PPAC

**A.**

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

Mailing Address 17402 Streamside Place

City State Zip Code  
Louisville KY 40245

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

Name of Employer Occupation  
PharMerica Svp, Account Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** 060608-20

Amount of Each Receipt this Period  
100.00

**B.**

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

Mailing Address 17402 Streamside Place

City State Zip Code  
Louisville KY 40245

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

Name of Employer Occupation  
PharMerica Svp, Account Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** 062008-20

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Victor Manuele

Mailing Address 1014 Northridge Rd

City State Zip Code  
Chaddsford PA 19317

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.90

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** 060608-7

Amount of Each Receipt this Period  
20.19

**SUBTOTAL** of Receipts This Page (optional) ..... ► **220.19**

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



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

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

FOR LINE NUMBER: PAGE 17 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 4769 Greenview Ct

City Commerce State MI Zip Code 48382

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.90

Date of Receipt 06 / 27 / 2008  
**Transaction ID: 062708-5**  
 Amount of Each Receipt this Period 20.19

**B.** Full Name (Last, First, Middle Initial)  
Jay Palin

Mailing Address 10528 Chestnut Hill

City Fishers State IN Zip Code 46038

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

Name of Employer Pharmerica Occupation Vice President, Ltc Operations

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 06 / 06 / 2008  
**Transaction ID: 060608-22**  
 Amount of Each Receipt this Period 40.00

**C.** Full Name (Last, First, Middle Initial)  
Jay Palin

Mailing Address 10528 Chestnut Hill

City Fishers State IN Zip Code 46038

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

Name of Employer Pharmerica Occupation Vice President, Ltc Operations

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 06 / 20 / 2008  
**Transaction ID: 062008-22**  
 Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.19

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 23  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
PharMerica Corporation Political Action Committee PPAC

**A.**

Full Name (Last, First, Middle Initial)  
Timothy M. Rowland

Mailing Address 5952 Jaegerglen Dr

City Lithia State FL Zip Code 33547

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

Name of Employer PharMerica Occupation Director, Operations Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt: 06 / 06 / 2008  
**Transaction ID: 060608-18**  
 Amount of Each Receipt this Period: 20.19

**B.**

Full Name (Last, First, Middle Initial)  
Timothy M. Rowland

Mailing Address 5952 Jaegerglen Dr

City Lithia State FL Zip Code 33547

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

Name of Employer PharMerica Occupation Director, Operations Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt: 06 / 20 / 2008  
**Transaction ID: 062008-18**  
 Amount of Each Receipt this Period: 20.19

**C.**

Full Name (Last, First, Middle Initial)  
Janice Rutkowski

Mailing Address 1110 Abbeys Way

City Tampa State FL Zip Code 33602

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

Name of Employer PharMerica Occupation Svp, Clinical Services & Prog Dev

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 846.12

Date of Receipt: 06 / 06 / 2008  
**Transaction ID: 060608-2**  
 Amount of Each Receipt this Period: 76.92

**SUBTOTAL** of Receipts This Page (optional) ..... ► **117.30**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 23  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Janice Rutkowski

Mailing Address 1110 Abbeys Way

City Tampa State FL Zip Code 33602

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

Name of Employer PharMerica Occupation Svp, Clinical Services & Prog Dev

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 846.12

Date of Receipt 06 / 20 / 2008  
**Transaction ID: 062008-2**

Amount of Each Receipt this Period 76.92

**B.**

Full Name (Last, First, Middle Initial)  
Kari Shanard-Koenders

Mailing Address 3005 Spruceleigh Ct

City Sioux Falls State SD Zip Code 57105

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

Name of Employer Pharmacia Occupation Utilization Management Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt 06 / 06 / 2008  
**Transaction ID: 060608-25**

Amount of Each Receipt this Period 20.19

**C.**

Full Name (Last, First, Middle Initial)  
Kari Shanard-Koenders

Mailing Address 3005 Spruceleigh Ct

City Sioux Falls State SD Zip Code 57105

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

Name of Employer Pharmacia Occupation Utilization Management Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt 06 / 20 / 2008  
**Transaction ID: 062008-25**

Amount of Each Receipt this Period 20.19

**SUBTOTAL** of Receipts This Page (optional) ..... ► **117.30**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 23		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 1514 Newberger Rd	<b>Transaction ID:</b> 060608-14
	City State Zip Code Lutz FL 33549	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Regional Director, Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks	Date of Receipt MM / DD / YYYY 06 / 20 / 2008
	Mailing Address 1514 Newberger Rd	<b>Transaction ID:</b> 062008-14
	City State Zip Code Lutz FL 33549	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Regional Director, Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Wendy Stearns	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 3443 Sunbeam Drive	<b>Transaction ID:</b> 060608-11
	City State Zip Code Sarasota FL 34240	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Director, Clinical Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.09	

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

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

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

FOR LINE NUMBER: PAGE 21 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Wendy Stearns

Mailing Address 3443 Sunbeam Drive

City State Zip Code  
Sarasota FL 34240

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

Name of Employer Occupation  
Pharmerica Director, Clinical Consulting

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

**Transaction ID:** 062008-11

Amount of Each Receipt this Period  
20.19

**B.** Full Name (Last, First, Middle Initial)  
Cheryl Zinn

Mailing Address 4008 September Song

City State Zip Code  
Manchaca TX 78652

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

**Transaction ID:** 060608-27

Amount of Each Receipt this Period  
20.19

**C.** Full Name (Last, First, Middle Initial)  
Cheryl Zinn

Mailing Address 4008 September Song

City State Zip Code  
Manchaca TX 78652

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

**Transaction ID:** 062008-27

Amount of Each Receipt this Period  
20.19

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

**TOTAL** This Period (last page this line number only) ..... ► **1428.83**

**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)

PAGE 22 / 23

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

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

A.

Full Name (Last, First, Middle Initial)  
Tom Feeney for Congress

Transaction ID: 05586-7678338885307

Date of Disbursement

Mailing Address PO Box 622345

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	0	8

City Oviedo State FL Zip Code 32762

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
2008 Primary

011
Category/ Type

Candidate Name  
Tom Feeney

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: FL District: 24

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

1000.00
---------

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

1000.00
---------

Image# 28991387696

Form/Schedule: **F3X**

Transaction ID:

\*\*\*\*\*