

# 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 Inc. Political Action Committee (PPAC)

ADDRESS (number and street) 3625 Queen Palm Drive  
 Check if different than previously reported. (ACC)  
Tampa FL 33619

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

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

5. Covering Period 05 01 2007 through 05 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Dan Dearborn

Signature of Treasurer Electronically Filed by Dan Dearborn Date 06 13 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
PharMerica Inc. Political Action Committee (PPAC)

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		64827.41
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	74679.35									
(c) Total Receipts (from Line 19) .....	2697.74	16049.68								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	77377.09	80877.09								
7. Total Disbursements (from Line 31) .....	0.00	3500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	77377.09	77377.09								
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 Inc. Political Action Committee (PPAC)

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	1774.97	4687.19
(i) Itemized (use Schedule A) .....	922.77	11362.49
(ii) Unitemized .....	2697.74	16049.68
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2697.74	16049.68
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)) .....	2697.74	16049.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2697.74	16049.68

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	3500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	3500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	0.00	3500.00

**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) .....	2697.74	16049.68
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2697.74	16049.68
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 25
	<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)  
PharMerica Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A. Terry Allard</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 2812 Wingren Road		<b>Transaction ID: 051807-14</b>
City Irving	State TX	Zip Code 75062
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>B. Michael Andrews</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 24712 231st Ave SE		<b>Transaction ID: 051807-42</b>
City Maple Valley	State WA	Zip Code 98038
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>C. Charles Ashy</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 4406 Effie St		<b>Transaction ID: 051807-13</b>
City Bellaire	State TX	Zip Code 77401
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Director, Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.57
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 25
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> Anthony Astore		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 7 Hempstead Road		<b>Transaction ID:</b> 050407-46	
City Trenton	State NJ	Zip Code 08610	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Consultant Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Anthony Astore		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 7 Hempstead Road		<b>Transaction ID:</b> 051807-44	
City Trenton	State NJ	Zip Code 08610	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Consultant Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Tracy Atkinson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 22 Evening Star Lp		<b>Transaction ID:</b> 050407-31	
City Edgewood	State NM	Zip Code 87015	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pharmerica	Occupation Manager, General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 25
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> Tracy Atkinson		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 22 Evening Star Lp		<b>Transaction ID:</b> 051807-30
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		Amount of Each Receipt this Period 25.00

Full Name (Last, First, Middle Initial) <b>B.</b> John Baughman		Date of Receipt MM / DD / YYYY 05 / 04 / 2007
Mailing Address 2432 Atchison Ave		<b>Transaction ID:</b> 050407-25
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		Amount of Each Receipt this Period 25.00

Full Name (Last, First, Middle Initial) <b>C.</b> John Baughman		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 2432 Atchison Ave		<b>Transaction ID:</b> 051807-24
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		Amount of Each Receipt this Period 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 25
	<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)  
PharMerica Inc. Political Action Committee (PPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Hill Boyett Mailing Address 137 Tatershall City Macon State GA Zip Code 31210 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 051807-54</b> Amount of Each Receipt this Period 20.19
Name of Employer: PharMerica Occupation: Manager, General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.90		

<b>B.</b> Full Name (Last, First, Middle Initial) Janet Britt Mailing Address 502 Covington Park Dr City Seffner State FL Zip Code 33584 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7 <b>Transaction ID: 050407-9</b> Amount of Each Receipt this Period 38.46
Name of Employer: PharMerica Occupation: Vice President, Contracts and Pricing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 384.60		

<b>C.</b> Full Name (Last, First, Middle Initial) Janet Britt Mailing Address 502 Covington Park Dr City Seffner State FL Zip Code 33584 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID: 051807-9</b> Amount of Each Receipt this Period 38.46
Name of Employer: PharMerica Occupation: Vice President, Contracts and Pricing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 384.60		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>97.11</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 25
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A. Stephen Coffey</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 6 Bright Water Drive		<b>Transaction ID: 051807-27</b>
City State Zip Code Warwick RI 02886	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>B. David Cole</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 1213 Augusta Drive		<b>Transaction ID: 050407-5</b>
City State Zip Code Shelbyville KY 40065	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. David Cole</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 1213 Augusta Drive		<b>Transaction ID: 051807-5</b>
City State Zip Code Shelbyville KY 40065	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 25
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A. Patrick Daugherty</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 419 Summer Sails Dr		<b>Transaction ID: 051807-36</b>
City State Zip Code Valrico FL 33594	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		
Name of Employer Pharmerica	Occupation Director, Regional Reimbursement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>B. Todd Dipprey</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 1401 7th		<b>Transaction ID: 051807-12</b>
City State Zip Code Shallowater TX 79363	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>C. Ronald Finch</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 12236 Juniper		<b>Transaction ID: 051807-21</b>
City State Zip Code Overland Park KS 66209	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. C		
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 25
	<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 Inc. Political Action Committee (PPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Christopher Flori		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 10232 Douglas Oaks Cr., #303		<b>Transaction ID:</b> 050407-41	
City Tampa	State FL	Amount of Each Receipt this Period 25.00	
Zip Code 33610			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Vice President, Product Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Christopher Flori		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 10232 Douglas Oaks Cr., #303		<b>Transaction ID:</b> 051807-39	
City Tampa	State FL	Amount of Each Receipt this Period 25.00	
Zip Code 33610			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Vice President, Product Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Linda Gelalia		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 9539 Norchester Cir		<b>Transaction ID:</b> 050407-60	
City Tampa	State FL	Amount of Each Receipt this Period 25.00	
Zip Code 33647			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Director, Process Improvement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 25
	<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)  
PharMerica Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> Linda Gelalia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 9539 Norchester Cir		<b>Transaction ID:</b> 050407-61	
City Tampa	State FL	Zip Code 33647	Amount of Each Receipt this Period -25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Director, Process Improvement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Linda Gelalia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 9539 Norchester Cir		<b>Transaction ID:</b> 050407-62	
City Tampa	State FL	Zip Code 33647	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Director, Process Improvement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Linda Gelalia		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 9539 Norchester Cir		<b>Transaction ID:</b> 051807-58	
City Tampa	State FL	Zip Code 33647	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Director, Process Improvement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	25.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 25
	<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 Inc. Political Action Committee (PPAC)

**A.** Full Name (Last, First, Middle Initial)  
Thomas Griffin

Mailing Address 10903 Ledgement Ln

City State Zip Code  
Windermere FL 34786

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 ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 050407-2

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas Griffin

Mailing Address 10903 Ledgement Ln

City State Zip Code  
Windermere FL 34786

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 ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2007

Transaction ID: 051807-2

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Lois Grubb

Mailing Address 909 Hemingway Cir

City State Zip Code  
Tampa FL 33602

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

Name of Employer Occupation  
PharMerica Svp, Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 769.20

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 050407-53

Amount of Each Receipt this Period  
76.92

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	126.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 25
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A. Lois Grubb</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 909 Hemingway Cir		<b>Transaction ID: 051807-51</b>	
City Tampa	State FL	Zip Code 33602	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PharMerica	Occupation Svp, Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20		

Full Name (Last, First, Middle Initial) <b>B. Pamela Johnson</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 4021 Audubon Drive		<b>Transaction ID: 050407-59</b>	
City Largo	State FL	Zip Code 33771	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Manager, General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Pamela Johnson</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 4021 Audubon Drive		<b>Transaction ID: 051807-57</b>	
City Largo	State FL	Zip Code 33771	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmerica	Occupation Manager, General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	126.92
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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

Full Name (Last, First, Middle Initial) <b>A. James Kilgus</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 130 Mason Road		<b>Transaction ID: 051807-48</b>
City Brooklyn	State CT	Zip Code 06234
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 20.19	
Name of Employer PharMerica	Occupation Director, Clinical Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>B. Mark Kirasich</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 7185 Crystal View Dr Se		<b>Transaction ID: 051807-38</b>
City Caleoonia	State MI	Zip Code 49316
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 20.19	
Name of Employer PharMerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>C. Barbara Klinkel</b>		Date of Receipt MM / DD / YYYY 05 / 04 / 2007
Mailing Address 2928 Falls		<b>Transaction ID: 050407-20</b>
City Rapid City	State SD	Zip Code 57702
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00	
Name of Employer PharMerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	65.38
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 25
	<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 Inc. 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 Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2007

**Transaction ID:** 051807-19

Amount of Each Receipt this Period  
25.00

**B.** 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 Occupation  
PharMerica Pharmacy Ops Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2007

**Transaction ID:** 051807-16

Amount of Each Receipt this Period  
21.00

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

Mailing Address 5617 Skimmer Dr

City State Zip Code  
Apollo Beach FL 33572

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

Name of Employer Occupation  
PharMerica Svp, Account Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

**Transaction ID:** 050407-11

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	146.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 25
	<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 Inc. Political Action Committee (PPAC)

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

Mailing Address 5617 Skimmer Dr

City Apollo Beach State FL Zip Code 33572

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

Name of Employer PharMerica Occupation Svp, Account Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 18 / 2007

**Transaction ID:** 051807-10

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
James Loftin

Mailing Address 1836 Windsong Cr

City Keller State TX Zip Code 76248

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 ▼ 346.14

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 04 / 2007

**Transaction ID:** 050407-10

Amount of Each Receipt this Period  
 38.46

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

Mailing Address 1014 Northridge Rd

City Chaddsford State PA Zip Code 19317

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  
 M M / D D / Y Y Y Y Y  
 05 / 18 / 2007

**Transaction ID:** 051807-45

Amount of Each Receipt this Period  
 20.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	158.65
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 25
	<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 Inc. 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  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 051807-40

Amount of Each Receipt this Period  
 20.19

**B.** Full Name (Last, First, Middle Initial)  
Doris Montgomery

Mailing Address 293 Townsend Loop

City Parsons State TN Zip Code 38363

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

Name of Employer Pharmerica Occupation Director, Applications Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.90

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 8 / 2 0 0 7

Transaction ID: 051807-6

Amount of Each Receipt this Period  
 20.19

**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 ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 050407-34

Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.38
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 25
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A. Jay Palin</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 10528 Chestnut Hill		<b>Transaction ID: 051807-33</b>
City State Zip Code Fishers IN 46038	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Vice President, Ltc Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Larry Reis</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 6036 E. Illinois		<b>Transaction ID: 051807-28</b>
City State Zip Code Fresno CA 93727	Amount of Each Receipt this Period 20.19	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Director, Clinical Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>C. Michael Rosenblum</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 17347 Emerald Chase Dr		<b>Transaction ID: 050407-39</b>
City State Zip Code Tampa FL 33647	Amount of Each Receipt this Period 76.92	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PharMerica	Occupation Svp, Marketing & Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	137.11
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 25
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> Timothy Rowland		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 5952 Jaegerglen Dr		<b>Transaction ID:</b> 051807-1
City Lithia	State FL	Zip Code 33547
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 20.19	
Name of Employer PharMerica	Occupation Director, Operations Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>B.</b> David Rushing		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 2212 13th St. SW		<b>Transaction ID:</b> 051807-23
City Great Falls	State MT	Zip Code 59404
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 20.19	
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>C.</b> Paula Ruskan		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 13902 Blue Vista		<b>Transaction ID:</b> 051807-4
City Sugar Land	State TX	Zip Code 77478
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 20.19	
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.57
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 25
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> Janice Rutkowski		Date of Receipt MM / DD / YYYY 05 / 04 / 2007
Mailing Address 1110 Abbeys Way		<b>Transaction ID:</b> 050407-16
City Tampa	State FL	Zip Code 33602
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 76.92
Name of Employer PharMerica	Occupation Svp, Clinical Services & Prog Dev	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20	

Full Name (Last, First, Middle Initial) <b>B.</b> Janice Rutkowski		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 1110 Abbeys Way		<b>Transaction ID:</b> 051807-15
City Tampa	State FL	Zip Code 33602
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 76.92
Name of Employer PharMerica	Occupation Svp, Clinical Services & Prog Dev	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20	

Full Name (Last, First, Middle Initial) <b>C.</b> Kari Shanard-Koenders		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 3005 Spruceleigh Ct		<b>Transaction ID:</b> 051807-20
City Sioux Falls	State SD	Zip Code 57105
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Utilization Management Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 25
	<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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> Elizabeth Shanks		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 1514 Newberger Rd		Transaction ID: 050407-63
City Lutz	State FL	Zip Code 33549
Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PharMerica	Occupation Regional Director, Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Elizabeth Shanks		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 1514 Newberger Rd		Transaction ID: 051807-59
City Lutz	State FL	Zip Code 33549
Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PharMerica	Occupation Regional Director, Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Julie Skarnagel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address P.O. Box 201663		Transaction ID: 051807-18
City San Antonio	State TX	Zip Code 78220
Amount of Each Receipt this Period 20.19		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

<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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 25
	(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 Inc. Political Action Committee (PPAC)

Full Name (Last, First, Middle Initial) <b>A. Wendy Stearns</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 3443 Sunbeam Drive		<b>Transaction ID: 051807-56</b>
City State Zip Code Sarasota FL 34240	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 20.19
Name of Employer PharMerica	Occupation Director, Clinical Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	

Full Name (Last, First, Middle Initial) <b>B. Daniel Weiss</b>		Date of Receipt MM / DD / YYYY 05 / 04 / 2007
Mailing Address 1605 S Dakota Ave		<b>Transaction ID: 050407-55</b>
City State Zip Code Sioux Falls SD 57105	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00
Name of Employer PharMerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Daniel Weiss</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2007
Mailing Address 1605 S Dakota Ave		<b>Transaction ID: 051807-53</b>
City State Zip Code Sioux Falls SD 57105	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00
Name of Employer PharMerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 25 / 25	
	(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"/> 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 Inc. Political Action Committee (PPAC)

**A.** 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 ▼  
201.90

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	8	/	2	0	0	7

Transaction ID: 051807-22

Amount of Each Receipt this Period  
20.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	20.19
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1774.97