

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) CAREMARK RX INC. EMPLOYEES POLITICAL ACTION COMMITTEE

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

ADDRESS (number and street) 2211 SANDERS ROAD, 10TH FLOOR NORTHBROOK IL 60062

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00384818 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 03 01 2006 through 03 31 2006

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

Type or Print Name of Treasurer James C. Luthin

Signature of Treasurer Electronically Filed by James C. Luthin Date 04 03 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Caremark Rx Inc. Employees Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		355624.00
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	346724.00									
(c) Total Receipts (from Line 19)	18696.00	57296.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	365420.00	412920.00								
7. Total Disbursements (from Line 31)	80500.00	128000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	284920.00	284920.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Caremark Rx Inc. Employees Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	14914.00	34437.00
(i) Itemized (use Schedule A)	3782.00	22859.00
(ii) Unitemized	18696.00	57296.00
(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)	18696.00	57296.00
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))	18696.00	57296.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18696.00	57296.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	69500.00	102500.00
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.....	11000.00	25500.00
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))..	80500.00	128000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	80500.00	128000.00

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	18696.00	57296.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18696.00	57296.00
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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lora Armstrong

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16530

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lora Armstrong

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16761

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jeffrey Audley

Mailing Address 7034 Alamo Downs Parkway

City State Zip Code
San Antonio TX 78238-4509

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

Name of Employer Caremark Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16533

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	147.00
TOTAL 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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey Audley

Mailing Address 7034 Alamo Downs Parkway

City State Zip Code
San Antonio TX 78238-4509

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16764

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Douglas Bain

Mailing Address 11809 Mira Mesa

City State Zip Code
Austin TX 78732

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16534

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Douglas Bain

Mailing Address 11809 Mira Mesa

City State Zip Code
Austin TX 78732

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16765

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	231.00
TOTAL 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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Neal Baker		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16535	
City Northbrook	State IL	Amount of Each Receipt this Period 77.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

Full Name (Last, First, Middle Initial) B. Neal Baker		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16766	
City Northbrook	State IL	Amount of Each Receipt this Period 77.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00		

Full Name (Last, First, Middle Initial) C. Robert Baldino		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16536	
City Northbrook	State IL	Amount of Each Receipt this Period 77.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

SUBTOTAL of Receipts This Page (optional) ▶	231.00
TOTAL 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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert Baldino

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16767

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Robert Banuelos

Mailing Address 15803 Strickland Court

City State Zip Code
Charlotte NC 28277

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16538

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Robert Banuelos

Mailing Address 15803 Strickland Court

City State Zip Code
Charlotte NC 28277

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16769

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	147.00
TOTAL 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 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Jan Berger		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 60330.C16541
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 130.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SVP	Aggregate Year-to-Date ▼ 650.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jan Berger		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 60330.C16772
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 130.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SVP	Aggregate Year-to-Date ▼ 780.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. H Bessant		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16542
City Scottsdale State AZ Zip Code 85260	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation VP CONSUMER PROGRAMS	Aggregate Year-to-Date ▼ 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL 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 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
H Bessant

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP CONSUMER PROGRAMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16773

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
Frederick Burns

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16551

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Frederick Burns

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16782

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	110.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joanne Carlson

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	6

Transaction ID: 60330.C16554

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joanne Carlson

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	6

Transaction ID: 60330.C16785

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Peter Clemens

Mailing Address 211 Commerce Street Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation EVP CHIEF FINANCIAL OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	6

Transaction ID: 60330.C16556

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	170.00
TOTAL 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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Peter Clemens		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 60330.C16787
City Nashville State TN Zip Code 37201-1817	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation EVP CHIEF FINANCIAL OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Jon Couch		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 3000 Fincastle Court		Transaction ID: 60330.C16559
City Midlothian State VA Zip Code 23113	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) C. Jon Couch		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 3000 Fincastle Court		Transaction ID: 60330.C16790
City Midlothian State VA Zip Code 23113	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

SUBTOTAL of Receipts This Page (optional) ▶	254.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven Covett

Mailing Address 5904 Downington PI NW

City State Zip Code
Acworth GA 30101-8480

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

Name of Employer Caremark Occupation DIR REGIONAL CLINICAL CONSULTI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16560

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Steven Covett

Mailing Address 5904 Downington PI NW

City State Zip Code
Acworth GA 30101-8480

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

Name of Employer Caremark Occupation DIR REGIONAL CLINICAL CONSULTI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16791

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Andrew Crawford

Mailing Address 211 Commerce Street Suite 800

City State Zip Code
Nashville TN 37201-1817

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

Name of Employer Caremark Occupation SR VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16561

Amount of Each Receipt this Period
150.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	220.00
TOTAL 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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Andrew Crawford

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation SR VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	6

Transaction ID: 60330.C16792

Amount of Each Receipt this Period
150.00

Receipt

B. Full Name (Last, First, Middle Initial)
Edwin Crawford

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation CHAIRMAN & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	6

Transaction ID: 60330.C16562

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Edwin Crawford

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation CHAIRMAN & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	6

Transaction ID: 60330.C16793

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	550.00
TOTAL 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 16 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Kenneth Czarnecki		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 60330.C16564
City Irving State TX Zip Code 75039	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SVP PHARMACIES AND SERVICE CEN	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Kenneth Czarnecki		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 60330.C16795
City Irving State TX Zip Code 75039	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SVP PHARMACIES AND SERVICE CEN	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Lucia DAmbrose		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16565
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 175.00	

SUBTOTAL of Receipts This Page (optional) ▶	235.00
TOTAL 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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Lucia D Ambrose		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16796	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation Director	Aggregate Year-to-Date ▼ 210.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Yolanda Daniel		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16566	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation Director	Aggregate Year-to-Date ▼ 425.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Yolanda Daniel		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16797	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation Director	Aggregate Year-to-Date ▼ 510.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	205.00
TOTAL 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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. James Dixon		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16567
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation Director	Aggregate Year-to-Date ▼ 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. James Dixon		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16798
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation Director	Aggregate Year-to-Date ▼ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Philip Ellison Jr		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 60330.C16569
City State Zip Code Irving TX 75039	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation AVP HUMAN RESOURCES	Aggregate Year-to-Date ▼ 175.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	115.00
TOTAL 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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Philip Ellison Jr		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 60330.C16800	
City Irving	State TX	Amount of Each Receipt this Period 35.00	
Zip Code 75039		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation AVP HUMAN RESOURCES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Timothy Fancher		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2105 Eagle Parkway		Transaction ID: 60330.C16570	
City Fort Worth	State TX	Amount of Each Receipt this Period 40.00	
Zip Code 76177		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation DIR PHARMACY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) C. Timothy Fancher		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 2105 Eagle Parkway		Transaction ID: 60330.C16801	
City Fort Worth	State TX	Amount of Each Receipt this Period 40.00	
Zip Code 76177		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation DIR PHARMACY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	115.00
TOTAL 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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

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

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16573

Amount of Each Receipt this Period
80.00

Receipt

B. Full Name (Last, First, Middle Initial)
Michael Fieri

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16804

Amount of Each Receipt this Period
80.00

Receipt

C. Full Name (Last, First, Middle Initial)
Sara Finley

Mailing Address 211 Commerce Street Suite 800

City State Zip Code
Nashville TN 37201-1817

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

Name of Employer Caremark Occupation SVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16574

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	260.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Sara Finley		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 60330.C16805	
City State Zip Code Nashville TN 37201-1817		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation SVP		Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Christopher Freed		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16578	
City State Zip Code Scottsdale AZ 85260		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation DIR PHARMACY RESOURCE CENTER		Aggregate Year-to-Date ▼ 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Christopher Freed		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16809	
City State Zip Code Scottsdale AZ 85260		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation DIR PHARMACY RESOURCE CENTER		Aggregate Year-to-Date ▼ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	180.00
TOTAL 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 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jane Freyer

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	6

Transaction ID: 60330.C16579

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jane Freyer

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	6

Transaction ID: 60330.C16810

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Joan Gallagher

Mailing Address 211 Commerce Street Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation SR VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	6

Transaction ID: 60330.C16580

Amount of Each Receipt this Period
125.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	195.00
TOTAL 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 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Joan Gallagher		Date of Receipt MM / DD / YYYY 03 / 24 / 2006
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 60330.C16811
City Nashville	State TN	Zip Code 37201-1817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Caremark	Occupation SR VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Joseph Gallo		Date of Receipt MM / DD / YYYY 03 / 10 / 2006
Mailing Address 5480 Sunstone Lane		Transaction ID: 60330.C16581
City Castle Rock	State CO	Zip Code 80104
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

Full Name (Last, First, Middle Initial) C. Joseph Gallo		Date of Receipt MM / DD / YYYY 03 / 24 / 2006
Mailing Address 5480 Sunstone Lane		Transaction ID: 60330.C16812
City Castle Rock	State CO	Zip Code 80104
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	195.00
TOTAL 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 24 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Douglas Ghertner

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16585

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Douglas Ghertner

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16816

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Michael Gill

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16589

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	147.00
TOTAL 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 25 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

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

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16820

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
David Golding

Mailing Address 2211 Sanders Road
10th Floor

City State Zip Code
Northbrook IL 60062-2507

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

Name of Employer Caremark Occupation SVP SPECIALTY PHARMACY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16592

Amount of Each Receipt this Period
135.00

Receipt

C. Full Name (Last, First, Middle Initial)
David Golding

Mailing Address 2211 Sanders Road
10th Floor

City State Zip Code
Northbrook IL 60062-2507

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

Name of Employer Caremark Occupation SVP SPECIALTY PHARMACY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16823

Amount of Each Receipt this Period
135.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	347.00
TOTAL 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 26 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gerard Greene

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16594

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gerard Greene

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16825

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Ryan Hall

Mailing Address 211 Commerce Street Suite 800

City State Zip Code
Nashville TN 37201-1817

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

Name of Employer Caremark Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16599

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	147.00
TOTAL 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 27 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ryan Hall

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16830

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Ed Hardin

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation EVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16601

Amount of Each Receipt this Period
135.00

Receipt

C. Full Name (Last, First, Middle Initial)
Ed Hardin

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation EVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16832

Amount of Each Receipt this Period
135.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	347.00
TOTAL 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 28 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Eddie Holmes		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16608	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation DIR IT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00		

Full Name (Last, First, Middle Initial) B. Eddie Holmes		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16839	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation DIR IT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. Constance Isley		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16612	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

SUBTOTAL of Receipts This Page (optional) ▶	147.00
TOTAL 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 29 / 87
	(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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Constance Isley

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16843

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jeffrey Jackson

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP OPERATIONS INTEGRATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16613

Amount of Each Receipt this Period
40.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jeffrey Jackson

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP OPERATIONS INTEGRATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16844

Amount of Each Receipt this Period
40.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	157.00
TOTAL 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 30 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
John David Joyner

Mailing Address 750 W. John Carpenter Fwy
Suite 1200

City Irving State TX Zip Code 75039-2507

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

Name of Employer Caremark Occupation EVP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16620

Amount of Each Receipt this Period
135.00

Receipt

B. Full Name (Last, First, Middle Initial)
John David Joyner

Mailing Address 750 W. John Carpenter Fwy
Suite 1200

City Irving State TX Zip Code 75039-2507

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

Name of Employer Caremark Occupation EVP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16851

Amount of Each Receipt this Period
135.00

Receipt

C. Full Name (Last, First, Middle Initial)
Bradley Karro

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation EVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16622

Amount of Each Receipt this Period
135.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	405.00
TOTAL 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 31 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Bradley Karro

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation EVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16853

Amount of Each Receipt this Period
135.00

Receipt

B. Full Name (Last, First, Middle Initial)
Geoffrey Kilgore

Mailing Address 5607 Glenridge Drive
Suite 300

City Atlanta State GA Zip Code 30342

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

Name of Employer Caremark Occupation VP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16627

Amount of Each Receipt this Period
80.00

Receipt

C. Full Name (Last, First, Middle Initial)
Geoffrey Kilgore

Mailing Address 5607 Glenridge Drive
Suite 300

City Atlanta State GA Zip Code 30342

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

Name of Employer Caremark Occupation VP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16858

Amount of Each Receipt this Period
80.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	295.00
TOTAL 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 32 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
James King

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP CLIENT SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16628

Amount of Each Receipt this Period
77.00

Receipt

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

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP CLIENT SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16859

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Kelli Kovak

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16631

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	189.00
TOTAL 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 33 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Kelli Kovak		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16862	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Charles Krause		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16632	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

Full Name (Last, First, Middle Initial) C. Charles Krause		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16863	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00		

SUBTOTAL of Receipts This Page (optional) ▶	189.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven Kunz

Mailing Address 109 East 2nd Street #11

City State Zip Code
New York NY 10009

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16634

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Steven Kunz

Mailing Address 109 East 2nd Street #11

City State Zip Code
New York NY 10009

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16865

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Timothy Kurth

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16635

Amount of Each Receipt this Period
35.00

Receipt

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Timothy Kurth

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16866

Amount of Each Receipt this Period
35.00

Receipt

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

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP IT MAIL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16637

Amount of Each Receipt this Period
80.00

Receipt

C. Full Name (Last, First, Middle Initial)
James Lewis

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP IT MAIL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16868

Amount of Each Receipt this Period
80.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	195.00
TOTAL 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 36 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Hetty Lima

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16638

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
Hetty Lima

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16869

Amount of Each Receipt this Period
40.00

Receipt

C. Full Name (Last, First, Middle Initial)
Philip Loftus

Mailing Address 1000 Lakeside Drive

City State Zip Code
Bannockburn IL 60015-1225

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

Name of Employer Caremark Occupation SVP CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16644

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **180.00**

TOTAL 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 37 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Philip Loftus		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 1000 Lakeside Drive		Transaction ID: 60330.C16875	
City State Zip Code Bannockburn IL 60015-1225		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SVP CIO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) B. Chris Luthin		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 60330.C16646	
City State Zip Code Northbrook IL 60062-6150		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Chris Luthin		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 60330.C16877	
City State Zip Code Northbrook IL 60062-6150		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL 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 38 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Bruce Lyons		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16647	
City Northbrook	State IL	Zip Code 60062-6150	Amount of Each Receipt this Period 77.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

Full Name (Last, First, Middle Initial) B. Bruce Lyons		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16878	
City Northbrook	State IL	Zip Code 60062-6150	Amount of Each Receipt this Period 77.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00		

Full Name (Last, First, Middle Initial) C. Bruce MacRae		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16648	
City Northbrook	State IL	Zip Code 60062-6150	Amount of Each Receipt this Period 55.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation AVP SALES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

SUBTOTAL of Receipts This Page (optional) ▶	209.00
TOTAL 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 39 / 87		
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Bruce MacRae

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation AVP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
03 / 24 / 2006

Transaction ID: 60330.C16879

Amount of Each Receipt this Period
55.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gregory Madsen

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation SR VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
03 / 10 / 2006

Transaction ID: 60330.C16649

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gregory Madsen

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation SR VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
03 / 24 / 2006

Transaction ID: 60330.C16880

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	209.00
TOTAL 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 40 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
James Margiotta

Mailing Address 34 South Berryline Circle

City State Zip Code
Spring TX 77381

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16652

Amount of Each Receipt this Period
77.00

Receipt

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

Mailing Address 34 South Berryline Circle

City State Zip Code
Spring TX 77381

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16883

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Deanna McFadden

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16656

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	231.00
TOTAL 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 41 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Deanna McFadden		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16887	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark Occupation VP	Aggregate Year-to-Date ▼ 462.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Thomas Mcinally		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2105 Eagle Parkway		Transaction ID: 60330.C16657	
City State Zip Code Fort Worth TX 76177	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark Occupation DIR ENGINEERING	Aggregate Year-to-Date ▼ 175.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Thomas Mcinally		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 2105 Eagle Parkway		Transaction ID: 60330.C16888	
City State Zip Code Fort Worth TX 76177	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark Occupation DIR ENGINEERING	Aggregate Year-to-Date ▼ 210.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	147.00
TOTAL 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 42 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Phillip Mcleod

Mailing Address 750 W. John Carpenter Fwy
Suite 1200

City Irving State TX Zip Code 75039

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

Name of Employer Caremark Occupation AVP BUSINESS DEVELOPMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16659

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Phillip Mcleod

Mailing Address 750 W. John Carpenter Fwy
Suite 1200

City Irving State TX Zip Code 75039

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

Name of Employer Caremark Occupation AVP BUSINESS DEVELOPMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16890

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Howard McLure

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation CHIEF OPERATING OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16660

Amount of Each Receipt this Period
150.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	304.00
TOTAL 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 43 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Howard McLure

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation CHIEF OPERATING OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	6

Transaction ID: 60330.C16891

Amount of Each Receipt this Period
150.00

Receipt

B. Full Name (Last, First, Middle Initial)
Patrick McStay

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	6

Transaction ID: 60330.C16662

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Patrick McStay

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	6

Transaction ID: 60330.C16893

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	304.00
TOTAL 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 44 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ronald Merlino

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation SVP TECHNOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16663

Amount of Each Receipt this Period
150.00

Receipt

B. Full Name (Last, First, Middle Initial)
Ronald Merlino

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation SVP TECHNOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16894

Amount of Each Receipt this Period
150.00

Receipt

C. Full Name (Last, First, Middle Initial)
Glenn Mitchell

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16667

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	335.00
TOTAL 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 45 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Glenn Mitchell

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2006

Transaction ID: 60330.C16898

Amount of Each Receipt this Period
 35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Rudy Mladenovic

Mailing Address 750 W. John Carpenter Fwy. Suite 1200

City Irving State TX Zip Code 75039

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

Name of Employer Caremark Occupation SVP TRADE RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2006

Transaction ID: 60330.C16668

Amount of Each Receipt this Period
 192.00

Receipt

C. Full Name (Last, First, Middle Initial)
Rudy Mladenovic

Mailing Address 750 W. John Carpenter Fwy. Suite 1200

City Irving State TX Zip Code 75039

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

Name of Employer Caremark Occupation SVP TRADE RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1152.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2006

Transaction ID: 60330.C16899

Amount of Each Receipt this Period
 192.00

Receipt

SUBTOTAL of Receipts This Page (optional)	419.00
TOTAL 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 46 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Marsha Moore		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16670
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation SVP MEDICAL AFFAIRS	
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. Marsha Moore		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16901
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation SVP MEDICAL AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Diane Nobles		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 60330.C16673
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation EVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00	

SUBTOTAL of Receipts This Page (optional) ▶	292.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Diane Nobles

Mailing Address 2211 Sanders Road
10th Floor

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation EVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1152.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16904

Amount of Each Receipt this Period
192.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joseph Piazza

Mailing Address 4240 Harpers Ferry Circle

City State Zip Code
Birmingham AL 35213-2223

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

Name of Employer Caremark Occupation DIR AVIATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16680

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Joseph Piazza

Mailing Address 4240 Harpers Ferry Circle

City State Zip Code
Birmingham AL 35213-2223

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

Name of Employer Caremark Occupation DIR AVIATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16911

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	262.00
TOTAL 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 48 / 87
<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Kevin Plunkett		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16682	
City Northbrook	State IL	Amount of Each Receipt this Period 35.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00	
Name of Employer Caremark	Occupation Director	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	Receipt	

Full Name (Last, First, Middle Initial) B. Kevin Plunkett		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16913	
City Northbrook	State IL	Amount of Each Receipt this Period 35.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00	
Name of Employer Caremark	Occupation Director	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	Receipt	

Full Name (Last, First, Middle Initial) C. Natalie Pons		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16685	
City Scottsdale	State AZ	Amount of Each Receipt this Period 50.00	
Zip Code 85260		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Advanced PCS	Occupation VP BUS PRACTICES & COMPLIANCE	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Receipt	

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

**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 49 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Natalie Pons		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16916	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Advanced PCS	Occupation VP BUS PRACTICES & COMPLIANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Scott Ragland		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16686	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP IT CORE BUSINESS SYSTEMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

Full Name (Last, First, Middle Initial) C. Scott Ragland		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16917	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP IT CORE BUSINESS SYSTEMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00		

SUBTOTAL of Receipts This Page (optional) ▶	204.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Rajiv Ranjan		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16687
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation Director	Aggregate Year-to-Date ▼ 175.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Rajiv Ranjan		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16918
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation Director	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John Scott Reid		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 20 Vose Hill Road		Transaction ID: 60330.C16690
City State Zip Code Westford MA 01886	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation VP	Aggregate Year-to-Date ▼ 385.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	147.00
TOTAL 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 51 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. John Scott Reid		Date of Receipt MM / DD / YYYY 03 / 24 / 2006
Mailing Address 20 Vose Hill Road		Transaction ID: 60330.C16921
City Westford	State MA	Zip Code 01886
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.00
Name of Employer Caremark	Occupation VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

Full Name (Last, First, Middle Initial) B. Dina Reynolds		Date of Receipt MM / DD / YYYY 03 / 10 / 2006
Mailing Address 7034 Alamo Downs Pkwy		Transaction ID: 60330.C16691
City San Antonio	State TX	Zip Code 78238-4509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation Director	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

Full Name (Last, First, Middle Initial) C. Dina Reynolds		Date of Receipt MM / DD / YYYY 03 / 24 / 2006
Mailing Address 7034 Alamo Downs Pkwy		Transaction ID: 60330.C16922
City San Antonio	State TX	Zip Code 78238-4509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation Director	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	147.00
TOTAL 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 52 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stephen Rill

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
03 / 10 / 2006

Transaction ID: 60330.C16694

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Stephen Rill

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
03 / 24 / 2006

Transaction ID: 60330.C16925

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Russell Ring

Mailing Address 1300 I Street NW Suite 525 West

City Washington State DC Zip Code 20005

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

Name of Employer Caremark Occupation SVP GOVERNMENT RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt
03 / 10 / 2006

Transaction ID: 60330.C16695

Amount of Each Receipt this Period
192.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 262.00

TOTAL 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 53 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Russell Ring

Mailing Address 1300 I Street NW
Suite 525 West

City Washington State DC Zip Code 20005

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

Name of Employer Caremark Occupation SVP GOVERNMENT RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1152.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16926

Amount of Each Receipt this Period
192.00

Receipt

B. Full Name (Last, First, Middle Initial)
Stacy Russell

Mailing Address 4850 Natomas Blvd #1422

City Sacramento State CA Zip Code 95835

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16700

Amount of Each Receipt this Period
40.00

Receipt

C. Full Name (Last, First, Middle Initial)
Stacy Russell

Mailing Address 4850 Natomas Blvd #1422

City Sacramento State CA Zip Code 95835

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16931

Amount of Each Receipt this Period
40.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	272.00
TOTAL 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 54 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joel Saban

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16702

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joel Saban

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16933

Amount of Each Receipt this Period
40.00

Receipt

C. Full Name (Last, First, Middle Initial)
Richard Scardina

Mailing Address 2211 Sanders Road
10th Floor

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation EVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16707

Amount of Each Receipt this Period
165.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	245.00
TOTAL 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 55 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Richard Scardina		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 60330.C16938
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 165.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation EVP	Aggregate Year-to-Date ▼ 990.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lisa Schuldes		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16709
City Scottsdale State AZ Zip Code 85260	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation VP FINANCE	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lisa Schuldes		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16940
City Scottsdale State AZ Zip Code 85260	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation VP FINANCE	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	265.00
TOTAL 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 56 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Wendy See		Date of Receipt MM / DD / YYYY 03 / 10 / 2006
Mailing Address 17 Honey Bear Court		Transaction ID: 60330.C16711
City Little Rock	State AR	Zip Code 72223
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Caremark	Occupation DIR ACCOUNT MANAGEMENT	Receipt
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. Wendy See		Date of Receipt MM / DD / YYYY 03 / 24 / 2006
Mailing Address 17 Honey Bear Court		Transaction ID: 60330.C16942
City Little Rock	State AR	Zip Code 72223
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Caremark	Occupation DIR ACCOUNT MANAGEMENT	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Kay Shafer		Date of Receipt MM / DD / YYYY 03 / 10 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16712
City Scottsdale	State AZ	Zip Code 85260
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.00
Name of Employer Caremark	Occupation AVP ACCOUNT MANAGEMENT	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	▶	178.00
TOTAL 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 57 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kay Shafer

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation AVP ACCOUNT MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16943

Amount of Each Receipt this Period
78.00

Receipt

B. Full Name (Last, First, Middle Initial)
Tommy Sheer

Mailing Address 15800 SW 25th St

City State Zip Code
Hollywood FL 33027-4222

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

Name of Employer Caremark Occupation VP GENERAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16713

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Tommy Sheer

Mailing Address 15800 SW 25th St

City State Zip Code
Hollywood FL 33027-4222

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

Name of Employer Caremark Occupation VP GENERAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16944

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	178.00
TOTAL 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 58 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Jerry Shipkin		Date of Receipt MM / DD / YYYY 03 / 10 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16715
City Northbrook	State IL	Zip Code 60062-6150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Caremark	Occupation VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) B. Jerry Shipkin		Date of Receipt MM / DD / YYYY 03 / 24 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16946
City Northbrook	State IL	Zip Code 60062-6150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Caremark	Occupation VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Gerald Simpson		Date of Receipt MM / DD / YYYY 03 / 10 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16717
City Northbrook	State IL	Zip Code 60062-6150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation Director	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

SUBTOTAL of Receipts This Page (optional)	▶	115.00
TOTAL 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 59 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Gerald Simpson		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16948	
City Northbrook	State IL	Zip Code 60062-6150	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Christopher Sims		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 60330.C16718	
City Irving	State TX	Zip Code 75039	Amount of Each Receipt this Period 77.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP TRADE RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

Full Name (Last, First, Middle Initial) C. Christopher Sims		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 60330.C16949	
City Irving	State TX	Zip Code 75039	Amount of Each Receipt this Period 77.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP TRADE RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00		

SUBTOTAL of Receipts This Page (optional)	189.00
TOTAL This Period (last page this line number only)	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gary Slagle

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation SR VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16720

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gary Slagle

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation SR VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16951

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Alice Sloan

Mailing Address 11311 McCormick Road
Building 75, Suite 230

City Hunt Valley State MD Zip Code 21031

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

Name of Employer Caremark Occupation VP ACCOUNT MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16721

Amount of Each Receipt this Period
75.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	275.00
TOTAL 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 61 / 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Alice Sloan

Mailing Address 11311 McCormick Road
Building 75, Suite 230

City State Zip Code
Hunt Valley MD 21031

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

Name of Employer Caremark Occupation VP ACCOUNT MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16952

Amount of Each Receipt this Period
75.00

Receipt

B. Full Name (Last, First, Middle Initial)
Dennis Sosinski

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2006

Transaction ID: 60330.C16723

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Dennis Sosinski

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2006

Transaction ID: 60330.C16954

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	145.00
TOTAL 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 62 / 87
	(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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Yvonne Southwell

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16724

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Yvonne Southwell

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16955

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
William Spalding

Mailing Address 211 Commerce Street

City State Zip Code
Nashville TN 37201-1806

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

Name of Employer Caremark Occupation EVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 903.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16725

Amount of Each Receipt this Period
192.00

Receipt

SUBTOTAL of Receipts This Page (optional)	346.00
TOTAL 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 63 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. William Spalding		Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2006
Mailing Address 211 Commerce Street		Transaction ID: 60330.C16956
City State Zip Code Nashville TN 37201-1806	Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation EVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1095.00	

Full Name (Last, First, Middle Initial) B. David Specht		Date of Receipt M M / D D / Y Y Y Y Y 03 / 10 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16726
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP SERVICE OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) C. David Specht		Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16957
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP SERVICE OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	272.00
TOTAL 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 64 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. William Spehr		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 11311 McCormick Road Building 75, Suite 230		Transaction ID: 60330.C16727	
City State Zip Code Hunt Valley MD 21031	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SVP ACCOUNT SERVICES		
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. William Spehr		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 11311 McCormick Road Building 75, Suite 230		Transaction ID: 60330.C16958	
City State Zip Code Hunt Valley MD 21031	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SVP ACCOUNT SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Carolyn Stang		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16729	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		

SUBTOTAL of Receipts This Page (optional) ▶	177.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Carolyn Stang

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	6

Transaction ID: 60330.C16960

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Paul Stivender

Mailing Address 300 Overbrook Road

City Birmingham State AL Zip Code 35213

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

Name of Employer Caremark Occupation SR VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	6

Transaction ID: 60330.C16731

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Paul Stivender

Mailing Address 300 Overbrook Road

City Birmingham State AL Zip Code 35213

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

Name of Employer Caremark Occupation SR VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	6

Transaction ID: 60330.C16962

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	177.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Sidney Stolz		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 1300 I Street NW Suite 525 West		Transaction ID: 60330.C16732
City Washington State DC Zip Code 20005-3336	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SVP MARKETING	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sidney Stolz		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 1300 I Street NW Suite 525 West		Transaction ID: 60330.C16963
City Washington State DC Zip Code 20005-3336	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SVP MARKETING	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Marian Swanson		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16734
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation VP	Aggregate Year-to-Date ▼ 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	240.00
TOTAL 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 67 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Marian Swanson

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16964

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
Albert Thigpen

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP TRADE RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16735

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Albert Thigpen

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP TRADE RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16965

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	110.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Andrew Ursitti		Date of Receipt M M / D D / Y Y Y Y Y 03 / 10 / 2006
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 60330.C16739
City Irving	State TX	Zip Code 75039-2507
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.00
Name of Employer Caremark	Occupation VP FINANCE	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) B. Andrew Ursitti		Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2006
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 60330.C16969
City Irving	State TX	Zip Code 75039-2507
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.00
Name of Employer Caremark	Occupation VP FINANCE	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

Full Name (Last, First, Middle Initial) C. Leslie Wachsman		Date of Receipt M M / D D / Y Y Y Y Y 03 / 10 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16741
City Northbrook	State IL	Zip Code 60062-6150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation Director	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

SUBTOTAL of Receipts This Page (optional)	▶	189.00
TOTAL 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 69 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Leslie Wachsman

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16971

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gloria Walker

Mailing Address 7034 Alamo Downs Pkwy

City State Zip Code
San Antonio TX 78238-4509

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 60330.C16742

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gloria Walker

Mailing Address 7034 Alamo Downs Pkwy

City State Zip Code
San Antonio TX 78238-4509

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2006

Transaction ID: 60330.C16972

Amount of Each Receipt this Period
35.00

Receipt

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Lee Warshawsky		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16745	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP MAIL SVC BUSINESS OPERATION		
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. Lee Warshawsky		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 60330.C16975	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP MAIL SVC BUSINESS OPERATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Mark Weeks		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 60330.C16748	
City State Zip Code Nashville TN 37201-1817	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Mark Weeks		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 60330.C16978
City Nashville State TN Zip Code 37201-1817	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation SR VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Scott Wertz		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16750
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP MARKETING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Scott Wertz		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 60330.C16980
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP MARKETING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joseph West

Mailing Address 4411 Tweedsmuir Court

City Moseley State VA Zip Code 23120

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 10 / 2006

Transaction ID: 60330.C16751

Amount of Each Receipt this Period
 35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joseph West

Mailing Address 4411 Tweedsmuir Court

City Moseley State VA Zip Code 23120

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 24 / 2006

Transaction ID: 60330.C16981

Amount of Each Receipt this Period
 35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Terry White

Mailing Address 750 W. John Carpenter Fwy Suite 1200

City Irving State TX Zip Code 75039-2507

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

Name of Employer Caremark Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 10 / 2006

Transaction ID: 60330.C16752

Amount of Each Receipt this Period
 77.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 147.00

TOTAL 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 73 / 87
	<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Terry White		Date of Receipt MM / DD / YYYY 03 / 24 / 2006
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 60330.C16982
City Irving	State TX	Zip Code 75039-2507
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.00
Name of Employer Caremark	Occupation VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

Full Name (Last, First, Middle Initial) B. C. Casey Wilkes		Date of Receipt MM / DD / YYYY 03 / 10 / 2006
Mailing Address 7034 Alamo Downs Pkwy		Transaction ID: 60330.C16753
City San Antonio	State TX	Zip Code 78238-4509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Caremark	Occupation Director	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) C. C. Casey Wilkes		Date of Receipt MM / DD / YYYY 03 / 24 / 2006
Mailing Address 7034 Alamo Downs Pkwy		Transaction ID: 60330.C16983
City San Antonio	State TX	Zip Code 78238-4509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Caremark	Occupation Director	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	157.00
TOTAL 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 74 / 87
	(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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Eric Yonkus

Mailing Address 5235 Ravenswood #10

City State Zip Code
Chicago IL 60640

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	6

Transaction ID: 60330.C16758

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Eric Yonkus

Mailing Address 5235 Ravenswood #10

City State Zip Code
Chicago IL 60640

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	6

Transaction ID: 60330.C16988

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	70.00
TOTAL This Period (last page this line number only)	▶	14914.00

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

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

FOR LINE NUMBER: (check only one)

<input 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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. American Benefits Council PAC		Transaction ID: 60330.E530 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 1212 New York Ave NW Suite 1250		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20005-3987	Category/ Type CONTRIBUTION TO FEDERAL PAC	
Purpose of Disbursement CONTRIBUTION TO FEDERAL PAC		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Other		

Full Name (Last, First, Middle Initial) B. Becerra for Congress		Transaction ID: 60330.E514 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address PO Box 116		Amount of Each Disbursement this Period 1000.00
City Hyattsville State MD Zip Code 20781-0116	Category/ Type	
Purpose of Disbursement Candidate Name XAVIER BECERRA		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 31		

Full Name (Last, First, Middle Initial) C. A Lot of People Who Support Jeff Bingama		Transaction ID: 60330.E508 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6
Mailing Address 110-B East Broad Street		Amount of Each Disbursement this Period 2000.00
City Falls Church State VA Zip Code 22046-4501	Category/ Type	
Purpose of Disbursement Candidate Name JEFF BINGAMAN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NM District: 00		

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Rely on Your Beliefs (ROYB) Fund		Transaction ID: 60330.E531 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003-1107	CONTRIBUTION TO FEDERAL PAC	
Purpose of Disbursement CONTRIBUTION TO FEDERAL PAC		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	

Full Name (Last, First, Middle Initial) B. Burgess for Congress (R-TX)		Transaction ID: 60330.E515 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address PO Box 2334		Amount of Each Disbursement this Period 5000.00
City Denton State TX Zip Code 76202-2334	Category/ Type	
Purpose of Disbursement		Candidate Name MICHAEL BURGESS
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 26	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cantor for Congress		Transaction ID: 60330.E516 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address P. O. Box 17813		Amount of Each Disbursement this Period 1000.00
City Richmond State VA Zip Code 23226-	Category/ Type	
Purpose of Disbursement		Candidate Name ERIC CANTOR
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

<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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Friends of Lois Capps (D-CA)		Transaction ID: 60330.E517 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 38 Ivy Street Southeast		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003-4006		
Purpose of Disbursement Candidate Name LOIS CAPPS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23	Category/Type	
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kent Conrad		Transaction ID: 60330.E510 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6
Mailing Address 122 Maryland Avenue NE c/o Tracey Buckman		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002-		
Purpose of Disbursement Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Category/Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Democratic Congressional Campaign Cmte		Transaction ID: 60330.E533 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address Speakers Club Membership Attn: Lane Luskey		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20003-		
Purpose of Disbursement CONTRIBUTION TO NATIONAL PARTY CMTE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

CONTRIBUTION TO NATIONAL PARTY CMTE

SUBTOTAL of Disbursements This Page (optional) ▶	17000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Mike DeWine for US Senate 2006		Transaction ID: 60330.E518 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6	
Mailing Address PO Box 340188		Amount of Each Disbursement this Period 2000.00	
City Columbus	State OH		Zip Code 43234-0188
Purpose of Disbursement			Category/ Type
Candidate Name RICHARD MICHAEL DEWINE			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: OH District: 00	

Full Name (Last, First, Middle Initial) B. John D. Dingell for Congress Committee		Transaction ID: 60330.E519 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6	
Mailing Address 607 -- 14th Street NW Suite 800		Amount of Each Disbursement this Period 1000.00	
City Washington	State DC		Zip Code 20005-
Purpose of Disbursement			Category/ Type
Candidate Name JOHN D DINGELL			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MI District: 15	

Full Name (Last, First, Middle Initial) C. Charles A. Gonzalez Congressional Cmte		Transaction ID: 60330.E520 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6	
Mailing Address 236 Massachusetts Ave NE, Ste 508		Amount of Each Disbursement this Period 2000.00	
City Washington	State DC		Zip Code 20002-4913
Purpose of Disbursement			Category/ Type
Candidate Name CHARLES A. GONZALEZ			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: TX District: 20	

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Congressman Bart Gordon Committee (D-TN)		Transaction ID: 60330.E521 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address PO Box 2008		Amount of Each Disbursement this Period 1000.00
City Murfreesboro State TN Zip Code 37133-2008		
Purpose of Disbursement	Category/Type	
Candidate Name BARTON JENNINGS GORDON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 06	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. People with Hart		Transaction ID: 60330.E522 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 501 L Street NW, #1		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20001-3670		
Purpose of Disbursement	Category/Type	
Candidate Name MELISSA HART		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ron Lewis for Congress		Transaction ID: 60330.E512 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6
Mailing Address PO Box 307		Amount of Each Disbursement this Period 1000.00
City Elizabethtown State KY Zip Code 42702-0307		
Purpose of Disbursement	Category/Type	
Candidate Name RON LEWIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Friends of Joe Lieberman		Transaction ID: 60330.E523 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 235 Massachusetts Ave NE		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20002-4913		
Purpose of Disbursement	Category/Type	
Candidate Name JOSEPH I LIEBERMAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CT District: 00		

Full Name (Last, First, Middle Initial) B. McCrery for Congress Committee (R-LA)		Transaction ID: 60330.E524 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address PO Box 52956 333 Texas Street, Suite 1900		Amount of Each Disbursement this Period 2000.00
City Shreveport State LA Zip Code 71135-2956		
Purpose of Disbursement	Category/Type	
Candidate Name JAMES OTIS III MCCRERY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: LA District: 04		

Full Name (Last, First, Middle Initial) C. McHenry for Congress		Transaction ID: 60330.E525 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address PO Box 1406		Amount of Each Disbursement this Period 2000.00
City Hickory State NC Zip Code 28603-1406		
Purpose of Disbursement	Category/Type	
Candidate Name PATRICK TIMOTHY MCHENRY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 10		

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Murphy for Congress		Transaction ID: 60330.E526 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address PO Box 2776		Amount of Each Disbursement this Period 2000.00
City Arlington	State VA	
Zip Code 22202-0776		
Purpose of Disbursement Candidate Name TIM MURPHY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: PA District: 18		

Full Name (Last, First, Middle Initial) B. National Republican Congressional Cmte		Transaction ID: 60330.E534 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 320 First Street SE		Amount of Each Disbursement this Period 15000.00
City Washington	State DC	
Zip Code 20003-1838		
Purpose of Disbursement CONTRIBUTION TO NATIONAL PARTY CMTE Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		CONTRIBUTION TO NATIONAL PARTY CMTE

Full Name (Last, First, Middle Initial) C. Earl Pomeroy for Congress (D-ND)		Transaction ID: 60330.E527 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address P. O. Box 75214		Amount of Each Disbursement this Period 1000.00
City Washington	State DC	
Zip Code 20013-5214		
Purpose of Disbursement Candidate Name EARL RALPH POMEROY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: ND District: 00		

SUBTOTAL of Disbursements This Page (optional) ▶	18000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Searchlight Leadership Fund Full Name (Last, First, Middle Initial) Mailing Address 422 C Street NE, Lower Level City Washington State DC Zip Code 20002-5818 Purpose of Disbursement CONTRIBUTION TO FEDERAL PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		Transaction ID: 60330.E532 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6 Amount of Each Disbursement this Period 2500.00 CONTRIBUTION TO FEDERAL PAC
--	--	--

B. Mike Rogers for Congress Full Name (Last, First, Middle Initial) Mailing Address PO Box 1113 City Anniston State AL Zip Code 36202-1113 Purpose of Disbursement Candidate Name MICHAEL ROGERS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 03 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60330.E528 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00
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C. Citizens for Rush Full Name (Last, First, Middle Initial) Mailing Address PO Box 7292 City Chicago State IL Zip Code 60680-7292 Purpose of Disbursement Candidate Name BOBBY LEE RUSH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 01 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60330.E509 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00
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SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Schakowsky for Congress		Transaction ID: 60330.E513 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6
Mailing Address PO Box 5130		Amount of Each Disbursement this Period 2000.00
City Evanston State IL Zip Code 60204-5130		
Purpose of Disbursement	Category/Type	
Candidate Name JANICE D SCHAKOWSKY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 09	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Snowe for Senate		Transaction ID: 60330.E529 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address PO Box 2006		Amount of Each Disbursement this Period 1000.00
City Portland State ME Zip Code 04104-5014		
Purpose of Disbursement	Category/Type	
Candidate Name OLYMPIA J SNOWE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mike Thompson for Congress		Transaction ID: 60330.E511 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6
Mailing Address 5429 Madison Ave		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95841-3111		
Purpose of Disbursement	Category/Type	
Candidate Name MIKE THOMPSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	69500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Rep Garnet Coleman Campaign Committee		Transaction ID: 60330.E499 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address PO Box 88140		Amount of Each Disbursement this Period 1000.00
City Houston State TX Zip Code 77288-0140	Purpose of Disbursement TX-147 STATE HOUSE P06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Rep Charlie Geren Campaign Committee		Transaction ID: 60330.E500 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 2900 Montgomery St		Amount of Each Disbursement this Period 1000.00
City Fort Worth State TX Zip Code 76107-5613	Purpose of Disbursement TX-99 STATE HOUSE P06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Rep. Pat Haggerty Campaign Committee		Transaction ID: 60330.E501 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 4855 N Mesa Suite 102A		Amount of Each Disbursement this Period 500.00
City El Paso State TX Zip Code 79912-	Purpose of Disbursement TX-78 STATE HOUSE P06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Rept. Scott Hochberg Campaign Committee		Transaction ID: 60330.E502 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 6000 Reims No 2605		Amount of Each Disbursement this Period 500.00
City Houston State TX Zip Code 77036-	Category/ Type	
Purpose of Disbursement TX-137 STATE HOUSE P06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Rep. Mark Homer Campaign Committee		Transaction ID: 60330.E503 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 1849 Lamar Ave Ste 120		Amount of Each Disbursement this Period 500.00
City Paris State TX Zip Code 75460-1463	Category/ Type	
Purpose of Disbursement TX-03 STATE HOUSE P06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Senator Jubelirer Committee		Transaction ID: 60330.E496 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address PO Box 792		Amount of Each Disbursement this Period 1000.00
City Harrisburg State PA Zip Code 17108-0792	Category/ Type	
Purpose of Disbursement PA-30 STATE SENATE P06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Senator Jane Nelson Campaign Committee		Transaction ID: 60330.E506 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address PO Box 608		Amount of Each Disbursement this Period 2000.00
City Grapevine	State TX	
Zip Code 76009-0608		
Purpose of Disbursement TX-12 STATE SENATE P06 Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Orie for Senate		Transaction ID: 60330.E497 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address PO Box 516		Amount of Each Disbursement this Period 500.00
City Ingomar	State PA	
Zip Code 15127-0516		
Purpose of Disbursement PA-40 STATE SENATE P06 Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Rep. Jim Pitts Campaign Committee		Transaction ID: 60330.E504 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 310 W Jefferson St		Amount of Each Disbursement this Period 500.00
City Waxahachie	State TX	
Zip Code 75165-3626		
Purpose of Disbursement TX-10 STATE HOUSE P06 Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Rep. Vicki Truitt Campaign Committee		Transaction ID: 60330.E505 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address PO Box 886		Amount of Each Disbursement this Period 1500.00
City Keller	State TX	
Zip Code 76221-0886		Category/ Type
Purpose of Disbursement TX-98 STATE HOUSE P06		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Kirk Watson Campaign Committee		Transaction ID: 60330.E507 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address PO Box 2004		Amount of Each Disbursement this Period 1000.00
City Austin	State TX	
Zip Code 78768-2004		Category/ Type
Purpose of Disbursement TX-14 STATE SENATE P06		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Citizens for Yudichak		Transaction ID: 60330.E498 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 44 W Grand St		Amount of Each Disbursement this Period 1000.00
City Nanticoke	State PA	
Zip Code 18634-3102		Category/ Type
Purpose of Disbursement PA-119 STATE HOUSE P06		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	11000.00