

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 04 2008 in the State of 0

5. Covering Period 10 16 2008 through 11 24 2008

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

Type or Print Name of Treasurer Teri Hartlage

Signature of Treasurer Electronically Filed by Teri Hartlage Date 12 02 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		91665.60
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	113531.54									
(c) Total Receipts (from Line 19) .....	4137.87	32003.81								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	117669.41	123669.41								
7. Total Disbursements (from Line 31) .....	34500.00	40500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	83169.41	83169.41								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	3293.86	22556.56
(i) Itemized (use Schedule A) .....	844.01	9447.25
(ii) Unitemized .....	4137.87	32003.81
(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) .....	4137.87	32003.81
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)) .....	4137.87	32003.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4137.87	32003.81

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	34500.00	40500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	34500.00	40500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34500.00	40500.00

**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) .....	4137.87	32003.81
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4137.87	32003.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 6 / 43
	<input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Andrews	Date of Receipt MM / DD / YYYY 10 / 17 / 2008
	Mailing Address 18016 72Nd Avenue South	<b>Transaction ID:</b> 101708-4
	City State Zip Code Kent WA 98032	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.80	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Andrews	Date of Receipt MM / DD / YYYY 10 / 31 / 2008
	Mailing Address 18016 72Nd Avenue South	<b>Transaction ID:</b> 103108-4
	City State Zip Code Kent WA 98032	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.80	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Andrews	Date of Receipt MM / DD / YYYY 11 / 14 / 2008
	Mailing Address 18016 72Nd Avenue South	<b>Transaction ID:</b> 111408-4
	City State Zip Code Kent WA 98032	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.80	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 43  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Charles Ashy</p> <p>Mailing Address 1289 N. Post Oak Blvd Ste 130</p> <p>City State Zip Code Houston TX 77055</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Director, Process Improvement</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">432.62</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 24 / 2008</p> <p><b>Transaction ID:</b> 102408-39</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">17.30</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Charles Ashy</p> <p>Mailing Address 1289 N. Post Oak Blvd Ste 130</p> <p>City State Zip Code Houston TX 77055</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Director, Process Improvement</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">432.62</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 11 / 07 / 2008</p> <p><b>Transaction ID:</b> 110708-39</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">17.30</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Charles Ashy</p> <p>Mailing Address 1289 N. Post Oak Blvd Ste 130</p> <p>City State Zip Code Houston TX 77055</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Director, Process Improvement</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">432.62</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 11 / 21 / 2008</p> <p><b>Transaction ID:</b> 112108-39</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">17.30</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">51.90</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 43  
(check only one)

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

**A.**

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

Mailing Address 2720-A Broadbent Parkway

City State Zip Code  
Albuquerque NM 87107

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2008

**Transaction ID:** 102408-29

Amount of Each Receipt this Period  
25.00

**B.**

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

Mailing Address 2720-A Broadbent Parkway

City State Zip Code  
Albuquerque NM 87107

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2008

**Transaction ID:** 110708-29

Amount of Each Receipt this Period  
25.00

**C.**

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

Mailing Address 2720-A Broadbent Parkway

City State Zip Code  
Albuquerque NM 87107

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2008

**Transaction ID:** 112108-29

Amount of Each Receipt this Period  
25.00

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

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) John Baughman	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 8030 Reeder Road	<b>Transaction ID:</b> 102408-26
	City Lenexa      State KS      Zip Code 66214	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Pharmerica      Occupation Lead Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 550.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) John Baughman	Date of Receipt MM / DD / YYYY 11 / 07 / 2008
	Mailing Address 8030 Reeder Road	<b>Transaction ID:</b> 110708-26
	City Lenexa      State KS      Zip Code 66214	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Pharmerica      Occupation Lead Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 550.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) John Baughman	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 8030 Reeder Road	<b>Transaction ID:</b> 112108-26
	City Lenexa      State KS      Zip Code 66214	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Pharmerica      Occupation Lead Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 550.00	

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

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

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

FOR LINE NUMBER: PAGE 10 / 43  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Hill Boyett

Mailing Address 3378 Brookdale Avenue Ste C-H

City State Zip Code  
Macon GA 31204

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 403.80

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 17 / 2008

**Transaction ID:** 101708-2

Amount of Each Receipt this Period  
20.19

**B.** Full Name (Last, First, Middle Initial)  
Hill Boyett

Mailing Address 3378 Brookdale Avenue Ste C-H

City State Zip Code  
Macon GA 31204

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 403.80

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 31 / 2008

**Transaction ID:** 103108-2

Amount of Each Receipt this Period  
20.19

**C.** Full Name (Last, First, Middle Initial)  
Hill Boyett

Mailing Address 3378 Brookdale Avenue Ste C-H

City State Zip Code  
Macon GA 31204

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 403.80

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 14 / 2008

**Transaction ID:** 111408-2

Amount of Each Receipt this Period  
20.19

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 43  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial) Joann Camasso		Date of Receipt MM / DD / YYYY 10 / 24 / 2008
Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 102408-8
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 11.54
Name of Employer Pharmerica	Occupation Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

**B.**

Full Name (Last, First, Middle Initial) Joann Camasso		Date of Receipt MM / DD / YYYY 11 / 07 / 2008
Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 110708-8
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 11.54
Name of Employer Pharmerica	Occupation Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

**C.**

Full Name (Last, First, Middle Initial) Joann Camasso		Date of Receipt MM / DD / YYYY 11 / 21 / 2008
Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 112108-8
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 11.54
Name of Employer Pharmerica	Occupation Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>34.62</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 43  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial) Thomas Caneris		Date of Receipt MM / DD / YYYY 10 / 24 / 2008
Mailing Address 1901 Campus PI		<b>Transaction ID:</b> 4894fabea130921ffa7
City Louisville	State KY	Zip Code 40299-2308
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 115.38
Name of Employer Pharmerica	Occupation SVP General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

**B.**

Full Name (Last, First, Middle Initial) Thomas Caneris		Date of Receipt MM / DD / YYYY 11 / 07 / 2008
Mailing Address 1901 Campus PI		<b>Transaction ID:</b> a1363885c9fa6a0fe67
City Louisville	State KY	Zip Code 40299-2308
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 115.38
Name of Employer Pharmerica	Occupation SVP General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

**C.**

Full Name (Last, First, Middle Initial) Thomas Caneris		Date of Receipt MM / DD / YYYY 11 / 21 / 2008
Mailing Address 1901 Campus PI		<b>Transaction ID:</b> 127e88673a52b67d2e2
City Louisville	State KY	Zip Code 40299-2308
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 115.38
Name of Employer Pharmerica	Occupation SVP General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>346.14</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 43  
(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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
David Cole

Mailing Address 12100 Plantside Drive

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** 101708-6

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
David Cole

Mailing Address 12100 Plantside Drive

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

**Transaction ID:** 103108-6

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
David Cole

Mailing Address 12100 Plantside Drive

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 8

**Transaction ID:** 111408-6

Amount of Each Receipt this Period  
25.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Patrick Daugherty	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 3625 Queen Palm Drive	<b>Transaction ID:</b> 102408-7
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pharmerica	Occupation Director, Regional Reimbursement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.18	

<b>B.</b>	Full Name (Last, First, Middle Initial) Patrick Daugherty	Date of Receipt MM / DD / YYYY 11 / 07 / 2008
	Mailing Address 3625 Queen Palm Drive	<b>Transaction ID:</b> 110708-7
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pharmerica	Occupation Director, Regional Reimbursement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.18	

<b>C.</b>	Full Name (Last, First, Middle Initial) Patrick Daugherty	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 3625 Queen Palm Drive	<b>Transaction ID:</b> 112108-7
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pharmerica	Occupation Director, Regional Reimbursement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.18	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 43
	(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

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Todd Dipprey		Date of Receipt	
	Mailing Address 6113 43rd St Suite D		M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 102408-19
	Lubbock	TX	79407	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		20.19	
Name of Employer Pharmerica		Occupation Manager, General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 444.18		

<b>B.</b>	Full Name (Last, First, Middle Initial) Todd Dipprey		Date of Receipt	
	Mailing Address 6113 43rd St Suite D		M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 110708-19
	Lubbock	TX	79407	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		20.19	
Name of Employer Pharmerica		Occupation Manager, General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 444.18		

<b>C.</b>	Full Name (Last, First, Middle Initial) Todd Dipprey		Date of Receipt	
	Mailing Address 6113 43rd St Suite D		M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 112108-19
	Lubbock	TX	79407	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		20.19	
Name of Employer Pharmerica		Occupation Manager, General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 444.18		

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 43  
(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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mary Douzjian

Mailing Address 8930 Activity Road Suite K

City San Diego State CA Zip Code 92126

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

Name of Employer Pharmerica Occupation Lead Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.80

Date of Receipt  

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

**Transaction ID:** 101708-1

Amount of Each Receipt this Period  
11.54

**B.**

Full Name (Last, First, Middle Initial)  
Mary Douzjian

Mailing Address 8930 Activity Road Suite K

City San Diego State CA Zip Code 92126

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

Name of Employer Pharmerica Occupation Lead Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.80

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

**Transaction ID:** 103108-1

Amount of Each Receipt this Period  
11.54

**C.**

Full Name (Last, First, Middle Initial)  
Mary Douzjian

Mailing Address 8930 Activity Road Suite K

City San Diego State CA Zip Code 92126

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

Name of Employer Pharmerica Occupation Lead Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.80

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

**Transaction ID:** 111408-1

Amount of Each Receipt this Period  
11.54

**SUBTOTAL** of Receipts This Page (optional) ..... ► **34.62**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 43  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial) Ronald Finch		Date of Receipt MM / DD / YYYY 10 / 24 / 2008
Mailing Address 8030 Reeder Road		<b>Transaction ID:</b> 102408-24
City Lenexa	State KS	Zip Code 66214
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.18	

**B.**

Full Name (Last, First, Middle Initial) Ronald Finch		Date of Receipt MM / DD / YYYY 11 / 07 / 2008
Mailing Address 8030 Reeder Road		<b>Transaction ID:</b> 110708-24
City Lenexa	State KS	Zip Code 66214
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.18	

**C.**

Full Name (Last, First, Middle Initial) Ronald Finch		Date of Receipt MM / DD / YYYY 11 / 21 / 2008
Mailing Address 8030 Reeder Road		<b>Transaction ID:</b> 112108-24
City Lenexa	State KS	Zip Code 66214
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.18	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 43

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Linda K. Gelalia

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
PharMerica Director, Process Improvement

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

Transaction ID: 102408-11

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)  
Linda K. Gelalia

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
PharMerica Director, Process Improvement

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

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

Transaction ID: 110708-11

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)  
Linda K. Gelalia

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
PharMerica Director, Process Improvement

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

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

Transaction ID: 112108-11

Amount of Each Receipt this Period

25.00

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

75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Lee Gregoire	Date of Receipt MM / DD / YYYY 11 / 07 / 2008
	Mailing Address 1041 Elkton Dr Suite A	<b>Transaction ID:</b> 110708-21
	City State Zip Code Colorado Springs CO 80907	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Manager, General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Lee Gregoire	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 1041 Elkton Dr Suite A	<b>Transaction ID:</b> 112108-21
	City State Zip Code Colorado Springs CO 80907	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Manager, General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas Griffin	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 735 West Highway 434 Suite B	<b>Transaction ID:</b> 102408-16
	City State Zip Code Longwood FL 32750	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Manager, General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	45.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 43  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Griffin

Mailing Address 735 West Highway 434 Suite B

City State Zip Code  
Longwood FL 32750

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
550.00

Date of Receipt

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

Transaction ID: 110708-16

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas Griffin

Mailing Address 735 West Highway 434 Suite B

City State Zip Code  
Longwood FL 32750

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
550.00

Date of Receipt

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

Transaction ID: 112108-16

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)  
Anthony Hernandez

Mailing Address 1901 Campus PI

City State Zip Code  
Louisville KY 40299-2308

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

Name of Employer Occupation  
Pharmerica SVP Human Resources

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
346.14

Date of Receipt

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

Transaction ID: de509fc00a144306566

Amount of Each Receipt this Period

115.38

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

165.38

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 43

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Anthony Hernandez

Mailing Address 1901 Campus Pl

City State Zip Code  
Louisville KY 40299-2308

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

Name of Employer Occupation  
PharMerica SVP Human Resources

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 346.14

Date of Receipt

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

Transaction ID: 91c2f81874b989f89cc

Amount of Each Receipt this Period

115.38

**B.**

Full Name (Last, First, Middle Initial)  
Pamela Johnson

Mailing Address 2200 Tall Pines Dr Suite 118

City State Zip Code  
Largo FL 33771

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

Transaction ID: 102408-10

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)  
Pamela Johnson

Mailing Address 2200 Tall Pines Dr Suite 118

City State Zip Code  
Largo FL 33771

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: 110708-10

Amount of Each Receipt this Period

25.00

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

165.38

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 22 / 43</span>
	(check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Pamela Johnson	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 2200 Tall Pines Dr Suite 118	<b>Transaction ID:</b> 112108-10
	City State Zip Code Largo FL 33771	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffrey Johnston	Date of Receipt MM / DD / YYYY 11 / 07 / 2008
	Mailing Address 77 Old Brickyard Lane #1	<b>Transaction ID:</b> 110708-4
	City State Zip Code Berlin CT 06037	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeffrey Johnston	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 77 Old Brickyard Lane #1	<b>Transaction ID:</b> 112108-4
	City State Zip Code Berlin CT 06037	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PharMerica Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) John Kernaghan		Date of Receipt	
	Mailing Address 1901 Campus PI		M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 0a35abd332faf832d78
	Louisville	KY	40299-2308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		115.39	
Name of Employer Pharmerica		Occupation SVP Chief Information Of		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 461.56		

<b>B.</b>	Full Name (Last, First, Middle Initial) John Kernaghan		Date of Receipt	
	Mailing Address 1901 Campus PI		M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> a04ff6bd4add22f2184
	Louisville	KY	40299-2308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		115.39	
Name of Employer Pharmerica		Occupation SVP Chief Information Of		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 461.56		

<b>C.</b>	Full Name (Last, First, Middle Initial) John Kernaghan		Date of Receipt	
	Mailing Address 1901 Campus PI		M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> 53831263b4fc2cdf0b2
	Louisville	KY	40299-2308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		115.39	
Name of Employer Pharmerica		Occupation SVP Chief Information Of		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 461.56		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>346.17</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 43  
(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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mark Kirasich

Mailing Address 4575 44Th Street Se Suite A

City State Zip Code  
Grand Rapids MI 49512

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 403.80

Date of Receipt  
MM / DD / YYYY  
10 / 17 / 2008

**Transaction ID:** 101708-3

Amount of Each Receipt this Period  
20.19

**B.**

Full Name (Last, First, Middle Initial)  
Mark Kirasich

Mailing Address 4575 44Th Street Se Suite A

City State Zip Code  
Grand Rapids MI 49512

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 403.80

Date of Receipt  
MM / DD / YYYY  
10 / 31 / 2008

**Transaction ID:** 103108-3

Amount of Each Receipt this Period  
20.19

**C.**

Full Name (Last, First, Middle Initial)  
Mark Kirasich

Mailing Address 4575 44Th Street Se Suite A

City State Zip Code  
Grand Rapids MI 49512

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

Name of Employer Occupation  
PharMerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 403.80

Date of Receipt  
MM / DD / YYYY  
11 / 14 / 2008

**Transaction ID:** 111408-3

Amount of Each Receipt this Period  
20.19

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

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 43  
(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

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

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

**A.**

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

Mailing Address 3615 5Th Street Suite 109

City Rapid City State SD Zip Code 57701

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 10 / 24 / 2008  
**Transaction ID:** 102408-22  
 Amount of Each Receipt this Period: 25.00

**B.**

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

Mailing Address 3615 5Th Street Suite 109

City Rapid City State SD Zip Code 57701

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 11 / 07 / 2008  
**Transaction ID:** 110708-22  
 Amount of Each Receipt this Period: 25.00

**C.**

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

Mailing Address 3615 5Th Street Suite 109

City Rapid City State SD Zip Code 57701

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

Name of Employer Pharmerica Occupation Manager, General

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 11 / 21 / 2008  
**Transaction ID:** 112108-22  
 Amount of Each Receipt this Period: 25.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 43  
(check only one)

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

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

**A.**

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

Mailing Address 5255 East River Road Suite 204

City State Zip Code  
Fridlay MN 55421

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

Name of Employer Occupation  
Pharmerica Pharmacy Ops Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

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

**Transaction ID:** 101708-8

Amount of Each Receipt this Period  
21.00

**B.**

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

Mailing Address 5255 East River Road Suite 204

City State Zip Code  
Fridlay MN 55421

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

Name of Employer Occupation  
Pharmerica Pharmacy Ops Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

**Transaction ID:** 103108-8

Amount of Each Receipt this Period  
21.00

**C.**

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

Mailing Address 5255 East River Road Suite 204

City State Zip Code  
Fridlay MN 55421

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

Name of Employer Occupation  
Pharmerica Pharmacy Ops Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 8

**Transaction ID:** 111408-8

Amount of Each Receipt this Period  
21.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **63.00**

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

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

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

FOR LINE NUMBER: PAGE 27 / 43  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
PharMerica Svp, Account Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2008

**Transaction ID:** 102408-18

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
PharMerica Svp, Account Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2008

**Transaction ID:** 110708-18

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
PharMerica Svp, Account Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2008

**Transaction ID:** 112108-18

Amount of Each Receipt this Period  
100.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 43  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial) Michael Martin		Date of Receipt MM / DD / YYYY 10 / 17 / 2008
Mailing Address 3410 E. Twelve Mile Rd Suite A		<b>Transaction ID:</b> 101708-5
City Warren	State MI	Zip Code 48092
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.80	

**B.**

Full Name (Last, First, Middle Initial) Michael Martin		Date of Receipt MM / DD / YYYY 10 / 31 / 2008
Mailing Address 3410 E. Twelve Mile Rd Suite A		<b>Transaction ID:</b> 103108-5
City Warren	State MI	Zip Code 48092
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.80	

**C.**

Full Name (Last, First, Middle Initial) Michael Martin		Date of Receipt MM / DD / YYYY 11 / 14 / 2008
Mailing Address 3410 E. Twelve Mile Rd Suite A		<b>Transaction ID:</b> 111408-5
City Warren	State MI	Zip Code 48092
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.80	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert McKay		Date of Receipt
	Mailing Address 1901 Campus PI		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Louisville	KY	40299-2308
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Pharmerica		Occupation SVP Sales & Marketing	<b>Transaction ID:</b> 2f8ebab3aa438360899
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="461.52"/>	<input type="text" value="115.38"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert McKay		Date of Receipt
	Mailing Address 1901 Campus PI		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Louisville	KY	40299-2308
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Pharmerica		Occupation SVP Sales & Marketing	<b>Transaction ID:</b> ea602c9db704cd2249b
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="461.52"/>	<input type="text" value="115.38"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert McKay		Date of Receipt
	Mailing Address 1901 Campus PI		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Louisville	KY	40299-2308
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Pharmerica		Occupation SVP Sales & Marketing	<b>Transaction ID:</b> e4ed540d2a2718d6509
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="461.52"/>	<input type="text" value="115.38"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="346.14"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 43  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Christopher Novak

Mailing Address 1123 Pearl Street

City State Zip Code  
Brockton MA 02301

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

Name of Employer Occupation  
PharMerica Consultant Pharmacist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 253.88

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2008

**Transaction ID:** 102408-2

Amount of Each Receipt this Period  
11.54

**B.**

Full Name (Last, First, Middle Initial)  
Christopher Novak

Mailing Address 1123 Pearl Street

City State Zip Code  
Brockton MA 02301

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

Name of Employer Occupation  
PharMerica Consultant Pharmacist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 253.88

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2008

**Transaction ID:** 110708-2

Amount of Each Receipt this Period  
11.54

**C.**

Full Name (Last, First, Middle Initial)  
Christopher Novak

Mailing Address 1123 Pearl Street

City State Zip Code  
Brockton MA 02301

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

Name of Employer Occupation  
PharMerica Consultant Pharmacist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 253.88

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2008

**Transaction ID:** 112108-2

Amount of Each Receipt this Period  
11.54

**SUBTOTAL** of Receipts This Page (optional) ..... ► 34.62

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jay Palin		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 102408-20
Name of Employer Pharmerica		Occupation Vice President, Ltc Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="880.00"/>	<input type="text" value="40.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Jay Palin		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 110708-20
Name of Employer Pharmerica		Occupation Vice President, Ltc Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="880.00"/>	<input type="text" value="40.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Jay Palin		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 112108-20
Name of Employer Pharmerica		Occupation Vice President, Ltc Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="880.00"/>	<input type="text" value="40.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="120.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 43  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial) Yvonne Preziosi		Date of Receipt MM / DD / YYYY 10 / 24 / 2008
Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 102408-13
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer Pharmerica	Occupation Manager, Paperless Implementation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

**B.**

Full Name (Last, First, Middle Initial) Yvonne Preziosi		Date of Receipt MM / DD / YYYY 11 / 07 / 2008
Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 110708-13
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer Pharmerica	Occupation Manager, Paperless Implementation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

**C.**

Full Name (Last, First, Middle Initial) Yvonne Preziosi		Date of Receipt MM / DD / YYYY 11 / 21 / 2008
Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 112108-13
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer Pharmerica	Occupation Manager, Paperless Implementation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	34.62
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 43  
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

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

**A.**

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

Mailing Address 1123 Pearl Street

City State Zip Code  
Brockton MA 02301

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

Name of Employer Occupation  
PharMerica Director, Operations Support

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 444.18

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

**Transaction ID:** 102408-15

Amount of Each Receipt this Period  
20.19

**B.**

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

Mailing Address 1123 Pearl Street

City State Zip Code  
Brockton MA 02301

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

Name of Employer Occupation  
PharMerica Director, Operations Support

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 444.18

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

**Transaction ID:** 110708-15

Amount of Each Receipt this Period  
20.19

**C.**

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

Mailing Address 1123 Pearl Street

City State Zip Code  
Brockton MA 02301

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

Name of Employer Occupation  
PharMerica Director, Operations Support

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 444.18

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

**Transaction ID:** 112108-15

Amount of Each Receipt this Period  
20.19

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kari Shanard-Koenders	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 3625 Queen Palm Drive	<b>Transaction ID:</b> 102408-23
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Pharmerica Occupation: Utilization Management Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 444.18	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kari Shanard-Koenders	Date of Receipt MM / DD / YYYY 11 / 07 / 2008
	Mailing Address 3625 Queen Palm Drive	<b>Transaction ID:</b> 110708-23
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Pharmerica Occupation: Utilization Management Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 444.18	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kari Shanard-Koenders	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 3625 Queen Palm Drive	<b>Transaction ID:</b> 112108-23
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Pharmerica Occupation: Utilization Management Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 444.18	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 3625 Queen Palm Drive	<b>Transaction ID:</b> 102408-12
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: PharMerica Occupation: Regional Director, Account Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 550.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks	Date of Receipt MM / DD / YYYY 11 / 07 / 2008
	Mailing Address 3625 Queen Palm Drive	<b>Transaction ID:</b> 110708-12
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: PharMerica Occupation: Regional Director, Account Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 550.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 3625 Queen Palm Drive	<b>Transaction ID:</b> 112108-12
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: PharMerica Occupation: Regional Director, Account Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 550.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 43  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Wendy Stearns

Mailing Address 3625 Queen Palm Drive

City Tampa State FL Zip Code 33619

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

Name of Employer Pharmerica Occupation Director, Clinical Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 444.18

Date of Receipt: 10 / 24 / 2008  
**Transaction ID:** 102408-9  
 Amount of Each Receipt this Period: 20.19

**B.**

Full Name (Last, First, Middle Initial)  
Wendy Stearns

Mailing Address 3625 Queen Palm Drive

City Tampa State FL Zip Code 33619

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

Name of Employer Pharmerica Occupation Director, Clinical Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 444.18

Date of Receipt: 11 / 07 / 2008  
**Transaction ID:** 110708-9  
 Amount of Each Receipt this Period: 20.19

**C.**

Full Name (Last, First, Middle Initial)  
Wendy Stearns

Mailing Address 3625 Queen Palm Drive

City Tampa State FL Zip Code 33619

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

Name of Employer Pharmerica Occupation Director, Clinical Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 444.18

Date of Receipt: 11 / 21 / 2008  
**Transaction ID:** 112108-9  
 Amount of Each Receipt this Period: 20.19

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

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

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

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

FOR LINE NUMBER: PAGE 37 / 43  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Alfred Vasquez  
 Mailing Address 6330 East 75Th Street Ste 322  
 City Indianapolis State IN Zip Code 46250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pharmerica Occupation Manager, General  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00  
 Date of Receipt 10 / 17 / 2008  
**Transaction ID:** 101708-7  
 Amount of Each Receipt this Period 15.00

**B.** Full Name (Last, First, Middle Initial)  
Alfred Vasquez  
 Mailing Address 6330 East 75Th Street Ste 322  
 City Indianapolis State IN Zip Code 46250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pharmerica Occupation Manager, General  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00  
 Date of Receipt 10 / 31 / 2008  
**Transaction ID:** 103108-7  
 Amount of Each Receipt this Period 15.00

**C.** Full Name (Last, First, Middle Initial)  
Alfred Vasquez  
 Mailing Address 6330 East 75Th Street Ste 322  
 City Indianapolis State IN Zip Code 46250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pharmerica Occupation Manager, General  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00  
 Date of Receipt 11 / 14 / 2008  
**Transaction ID:** 111408-7  
 Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 45.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 43  
(check only one)

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Cheryl Zinn		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 321 W. Ben White Blvd Ste 103		<b>Transaction ID:</b> 102408-25		
	City Austin	State TX	Zip Code 78704	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. <b>C</b>		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Pharmerica		Occupation Manager, General		Aggregate Year-to-Date ▼ 444.18	

<b>B.</b>	Full Name (Last, First, Middle Initial) Cheryl Zinn		Date of Receipt MM / DD / YYYY 11 / 07 / 2008		
	Mailing Address 321 W. Ben White Blvd Ste 103		<b>Transaction ID:</b> 110708-25		
	City Austin	State TX	Zip Code 78704	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. <b>C</b>		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Pharmerica		Occupation Manager, General		Aggregate Year-to-Date ▼ 444.18	

<b>C.</b>	Full Name (Last, First, Middle Initial) Cheryl Zinn		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 321 W. Ben White Blvd Ste 103		<b>Transaction ID:</b> 112108-25		
	City Austin	State TX	Zip Code 78704	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. <b>C</b>		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Pharmerica		Occupation Manager, General		Aggregate Year-to-Date ▼ 444.18	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>60.57</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3293.86</b>

# 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

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Bilirakis for Congress <hr/> Mailing Address 610 S. Boulevard <hr/> City Tampa State FL Zip Code 33606 <hr/> Purpose of Disbursement 2008 General Candidate Name Gus Michael Bilirakis <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 09	<b>Transaction ID:</b> 44353-3120691180229 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Congressman Waxman Campaign Committee <hr/> Mailing Address 6380 Wilshire Blvd. #1612 <hr/> City Los Angeles State CA Zip Code 90048 <hr/> Purpose of Disbursement 2008 General Candidate Name Henry A. Waxman <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 30	<b>Transaction ID:</b> 44353-4903985857963 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Doggett for Us Congress <hr/> Mailing Address PO Box 5843 <hr/> City Austin State TX Zip Code 78763 <hr/> Purpose of Disbursement 2008 General Candidate Name Lloyd Doggett <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 25	<b>Transaction ID:</b> 44353-6052057147026 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2008 <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) ..... ▶

**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)  
PharMerica Corporation Political Action Committee PPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Geoff Davis for Congress</p> <p>Mailing Address 3161 Dixie Highway Suite F</p> <p>City Erlanger State KY Zip Code 41018</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name Geoffrey C. Davis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: KY District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 44353-0162011981010</p> <p>Date of Disbursement 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Guthrie for Congress</p> <p>Mailing Address PO Box 9639</p> <p>City Bowling Green State KY Zip Code 42102</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name Brett Guthrie</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: KY District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 30958-0894586443901</p> <p>Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Pallone for Congress</p> <p>Mailing Address PO Box 3176</p> <p>City Long Branch State NJ Zip Code 07740</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name Frank Pallone, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NJ District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 44353-1304590106010</p> <p>Date of Disbursement 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>011 Category/ Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	12000.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) People for English <hr/> Mailing Address PO Box 1940 <hr/> City Erie State PA Zip Code 16507 <hr/> Purpose of Disbursement 2008 General Candidate Name Phil English <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30958-6319085955619 Date of Disbursement 10 / 23 / 2008
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee <hr/> Mailing Address PO Box 8331 <hr/> City Fremont State CA Zip Code 94537 <hr/> Purpose of Disbursement 2008 General Candidate Name Fortney H. Pete Stark <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 13 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 44353-6039850115776 Date of Disbursement 10 / 20 / 2008
	Amount of Each Disbursement this Period 4000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Reed Committee <hr/> Mailing Address PO Box 8628 <hr/> City Cranston State RI Zip Code 02920 <hr/> Purpose of Disbursement 2008 General Candidate Name Jack Reed <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 44353-1498681902885 Date of Disbursement 10 / 20 / 2008
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

9500.00

**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)  
PharMerica Corporation Political Action Committee PPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Republican Party of Kentucky <hr/> Mailing Address PO Box 1068 <hr/> City Frankfort State KY Zip Code 40602 <hr/> Purpose of Disbursement 2008 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 44353-1411706805229 Date of Disbursement 10 / 20 / 2008
	Amount of Each Disbursement this Period 3000.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Texans for Senator John Cornyn Inc <hr/> Mailing Address 6850 Austin Centre Blvd Suite 180 <hr/> City Austin State TX Zip Code 78731 <hr/> Purpose of Disbursement 2008 General Candidate Name John Cornyn <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 44353-8708917498588 Date of Disbursement 10 / 20 / 2008
	Amount of Each Disbursement this Period 3000.00 Category/Type 011

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

6000.00

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

34500.00

Image# 28934521947

Form/Schedule: **F3X**

Transaction ID:

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