

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 (12S)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 23 2010 through 12 31 2010

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 A. Hartlage

Signature of Treasurer Electronically Filed by Teri A. Hartlage Date 01 17 2011

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							
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FEC FORM 3X
(Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		139722.03
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	132269.07									
(c) Total Receipts (from Line 19)	4893.62	41440.66								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	137162.69	181162.69								
7. Total Disbursements (from Line 31)	500.00	44500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	136662.69	136662.69								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

Write or Type Committee Name

PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	4722.36	32823.19
(ii) Unitemized	171.26	8617.47
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4893.62	41440.66
(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)	4893.62	41440.66
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))	4893.62	41440.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4893.62	41440.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	44500.00
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))..	500.00	44500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	500.00	44500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	4893.62	41440.66
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4893.62	41440.66
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: PAGE 7 / 45

(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) Michael Andrews		Date of Receipt MM / DD / YYYY 12 / 03 / 2010		
	Mailing Address 1901 Campus Place		Transaction ID: 120310-12		
	City Louisville	State KY	Zip Code 40299	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Pharmerica	Occupation Manager, General			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 545.13			

B.	Full Name (Last, First, Middle Initial) Michael Andrews		Date of Receipt MM / DD / YYYY 12 / 17 / 2010		
	Mailing Address 1901 Campus Place		Transaction ID: 121710-12		
	City Louisville	State KY	Zip Code 40299	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Pharmerica	Occupation Manager, General			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 545.13			

C.	Full Name (Last, First, Middle Initial) Michael Andrews		Date of Receipt MM / DD / YYYY 12 / 30 / 2010		
	Mailing Address 1901 Campus Place		Transaction ID: 123010-12		
	City Louisville	State KY	Zip Code 40299	Amount of Each Receipt this Period 20.19	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Pharmerica	Occupation Manager, General			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 545.13			

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 8 / 45
	<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) Charles Ashy		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. C		Transaction ID: 120310-32
Name of Employer Pharmerica		Occupation Director, Process Improvement	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 449.80	<input type="text" value="17.30"/>

B.	Full Name (Last, First, Middle Initial) Charles Ashy		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. C		Transaction ID: 121710-32
Name of Employer Pharmerica		Occupation Director, Process Improvement	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 449.80	<input type="text" value="17.30"/>

C.	Full Name (Last, First, Middle Initial) Charles Ashy		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. C		Transaction ID: 123010-33
Name of Employer Pharmerica		Occupation Director, Process Improvement	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 449.80	<input type="text" value="17.30"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="51.90"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 9 / 45
(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)
Tracy Atkinson

Mailing Address 2720-A Broadbent Parkway

City Albuquerque State NM Zip Code 87107

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 ▼ 650.00

Date of Receipt 12 / 03 / 2010

Transaction ID: 120310-21

Amount of Each Receipt this Period 25.00

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

Mailing Address 2720-A Broadbent Parkway

City Albuquerque State NM Zip Code 87107

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 ▼ 650.00

Date of Receipt 12 / 17 / 2010

Transaction ID: 121710-21

Amount of Each Receipt this Period 25.00

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

Mailing Address 2720-A Broadbent Parkway

City Albuquerque State NM Zip Code 87107

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 ▼ 650.00

Date of Receipt 12 / 30 / 2010

Transaction ID: 123010-22

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 10 / 45

(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)
John Baughman

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 Lead Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

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

Transaction ID: 112610-8

Amount of Each Receipt this Period

25.00

B.

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

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 Lead Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

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

Transaction ID: 121010-8

Amount of Each Receipt this Period

25.00

C.

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

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 Lead Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

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

Transaction ID: 122310-7

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 11 / 45
(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 12 / 03 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 120310-29
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		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 ▼ 2999.88	

B.

Full Name (Last, First, Middle Initial) Thomas Caneris		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 121710-29
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		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 ▼ 2999.88	

C.

Full Name (Last, First, Middle Initial) Thomas Caneris		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 123010-30
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		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 ▼ 2999.88	

SUBTOTAL of Receipts This Page (optional)	346.14
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 45
	<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) Stephen Coffey			Date of Receipt MM / DD / YYYY 12 / 03 / 2010		
	Mailing Address 83 Vermont Ave. Unit 2			Transaction ID: 120310-4		
	City Warwick	State RI	Zip Code 02888	Amount of Each Receipt this Period 17.30		
	FEC ID number of contributing federal political committee. C					
	Name of Employer Pharmerica		Occupation General Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 449.80						

B.	Full Name (Last, First, Middle Initial) Stephen Coffey			Date of Receipt MM / DD / YYYY 12 / 17 / 2010		
	Mailing Address 83 Vermont Ave. Unit 2			Transaction ID: 121710-4		
	City Warwick	State RI	Zip Code 02888	Amount of Each Receipt this Period 17.30		
	FEC ID number of contributing federal political committee. C					
	Name of Employer Pharmerica		Occupation General Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 449.80						

C.	Full Name (Last, First, Middle Initial) Stephen Coffey			Date of Receipt MM / DD / YYYY 12 / 30 / 2010		
	Mailing Address 83 Vermont Ave. Unit 2			Transaction ID: 123010-4		
	City Warwick	State RI	Zip Code 02888	Amount of Each Receipt this Period 17.30		
	FEC ID number of contributing federal political committee. C					
	Name of Employer Pharmerica		Occupation General Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 449.80						

SUBTOTAL of Receipts This Page (optional)	▶	51.90
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 45
(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)
Todd Dipprey

Mailing Address 6113 43rd St Suite D

City Lubbock State TX Zip Code 79407

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 ▼ 524.94

Date of Receipt 12 / 03 / 2010

Transaction ID: 120310-15

Amount of Each Receipt this Period 20.19

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

Mailing Address 6113 43rd St Suite D

City Lubbock State TX Zip Code 79407

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 ▼ 524.94

Date of Receipt 12 / 17 / 2010

Transaction ID: 121710-15

Amount of Each Receipt this Period 20.19

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

Mailing Address 6113 43rd St Suite D

City Lubbock State TX Zip Code 79407

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 ▼ 524.94

Date of Receipt 12 / 30 / 2010

Transaction ID: 123010-15

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: PAGE 14 / 45
(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) Leo F Doherty		Date of Receipt MM / DD / YYYY 12 / 03 / 2010
Mailing Address 1515 Commonwealth Avenue		Transaction ID: 120310-3
City Boston	State MA	Zip Code 02135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.30
Name of Employer Boston - KPHS	Occupation Dir Pharmacy-E (Hospital)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.50	

B.

Full Name (Last, First, Middle Initial) Leo F Doherty		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
Mailing Address 1515 Commonwealth Avenue		Transaction ID: 121710-3
City Boston	State MA	Zip Code 02135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.30
Name of Employer Boston - KPHS	Occupation Dir Pharmacy-E (Hospital)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.50	

C.

Full Name (Last, First, Middle Initial) Leo F Doherty		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
Mailing Address 1515 Commonwealth Avenue		Transaction ID: 123010-3
City Boston	State MA	Zip Code 02135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.30
Name of Employer Boston - KPHS	Occupation Dir Pharmacy-E (Hospital)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.50	

SUBTOTAL of Receipts This Page (optional)	51.90
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 15 / 45
	<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		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 2 6 / 2 0 1 0
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. C		Transaction ID: 112610-2
Name of Employer Pharmerica		Occupation Lead Consultant	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"/> 300.04	<input type="text"/> 11.54

B.	Full Name (Last, First, Middle Initial) Mary Douzjian		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 1 0 / 2 0 1 0
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. C		Transaction ID: 121010-2
Name of Employer Pharmerica		Occupation Lead Consultant	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"/> 300.04	<input type="text"/> 11.54

C.	Full Name (Last, First, Middle Initial) Mary Douzjian		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 2 3 / 2 0 1 0
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. C		Transaction ID: 122310-2
Name of Employer Pharmerica		Occupation Lead Consultant	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"/> 300.04	<input type="text"/> 11.54

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 34.62
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 45
	<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		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. C		Transaction ID: 120310-13
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="650.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Thomas Griffin		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. C		Transaction ID: 121710-13
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="650.00"/>	<input type="text" value="25.00"/>

C.	Full Name (Last, First, Middle Initial) Thomas Griffin		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. C		Transaction ID: 123010-13
Name of Employer Pharmerica		Occupation Manager, General	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="650.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 45
(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) Teri Hartlage		Date of Receipt MM / DD / YYYY 12 / 03 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 120310-1
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.77
Name of Employer Pharmerica	Occupation VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.02	

B.

Full Name (Last, First, Middle Initial) Teri Hartlage		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 121710-1
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.77
Name of Employer Pharmerica	Occupation VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.02	

C.

Full Name (Last, First, Middle Initial) Teri Hartlage		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 123010-1
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.77
Name of Employer Pharmerica	Occupation VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.02	

SUBTOTAL of Receipts This Page (optional)	▶	92.31
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 45
(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 Place

City State Zip Code
Louisville KY 40299

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 ▼
2999.88

Date of Receipt
MM / DD / YYYY
12 / 03 / 2010

Transaction ID: 120310-26

Amount of Each Receipt this Period
115.38

B.

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

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 Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2999.88

Date of Receipt
MM / DD / YYYY
12 / 17 / 2010

Transaction ID: 121710-26

Amount of Each Receipt this Period
115.38

C.

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

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 Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2999.88

Date of Receipt
MM / DD / YYYY
12 / 30 / 2010

Transaction ID: 123010-27

Amount of Each Receipt this Period
115.38

SUBTOTAL of Receipts This Page (optional) ► **346.14**

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 / 45
	<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) Nancy M Hoffman		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer REGIONAL OH		Occupation VP LTC Operations	Transaction ID: 120310-20
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="744.00"/>	<input type="text" value="31.00"/>

B.	Full Name (Last, First, Middle Initial) Nancy M Hoffman		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer REGIONAL OH		Occupation VP LTC Operations	Transaction ID: 121710-20
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="744.00"/>	<input type="text" value="31.00"/>

C.	Full Name (Last, First, Middle Initial) Nancy M Hoffman		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer REGIONAL OH		Occupation VP LTC Operations	Transaction ID: 123010-21
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="744.00"/>	<input type="text" value="31.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="93.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 45
(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)
Richard Hollar

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 Dir Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 120310-22

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Richard Hollar

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 Dir Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 121710-22

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Richard Hollar

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 Dir Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 123010-23

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 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 ▼ 650.00

Date of Receipt
MM / DD / YYYY
12 / 03 / 2010

Transaction ID: 120310-8

Amount of Each Receipt this Period
25.00

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 ▼ 650.00

Date of Receipt
MM / DD / YYYY
12 / 17 / 2010

Transaction ID: 121710-8

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 ▼ 650.00

Date of Receipt
MM / DD / YYYY
12 / 30 / 2010

Transaction ID: 123010-8

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 22 / 45
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Timothy W. Jolly

Mailing Address 1901 Campus Place

City State Zip Code
Louisville KY 40299

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

Name of Employer: BUSINESS DEVELOPMENT Occupation: VP Acquisitions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt: 12 / 03 / 2010
Transaction ID: 120310-2
 Amount of Each Receipt this Period: 30.00

B.

Full Name (Last, First, Middle Initial)
Timothy W. Jolly

Mailing Address 1901 Campus Place

City State Zip Code
Louisville KY 40299

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

Name of Employer: BUSINESS DEVELOPMENT Occupation: VP Acquisitions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt: 12 / 17 / 2010
Transaction ID: 121710-2
 Amount of Each Receipt this Period: 30.00

C.

Full Name (Last, First, Middle Initial)
Timothy W. Jolly

Mailing Address 1901 Campus Place

City State Zip Code
Louisville KY 40299

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

Name of Employer: BUSINESS DEVELOPMENT Occupation: VP Acquisitions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt: 12 / 30 / 2010
Transaction ID: 123010-2
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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 23 / 45

(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) John Kernaghan		Date of Receipt MM / DD / YYYY 12 / 03 / 2010		
	Mailing Address 1901 Campus Place		Transaction ID: 120310-35		
	City Louisville	State KY	Zip Code 40299	Amount of Each Receipt this Period 115.39	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Pharmerica		Occupation SVP Chief Information Of			
		Aggregate Year-to-Date ▼ 3000.14			

B.	Full Name (Last, First, Middle Initial) John Kernaghan		Date of Receipt MM / DD / YYYY 12 / 17 / 2010		
	Mailing Address 1901 Campus Place		Transaction ID: 121710-35		
	City Louisville	State KY	Zip Code 40299	Amount of Each Receipt this Period 115.39	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Pharmerica		Occupation SVP Chief Information Of			
		Aggregate Year-to-Date ▼ 3000.14			

C.	Full Name (Last, First, Middle Initial) John Kernaghan		Date of Receipt MM / DD / YYYY 12 / 30 / 2010		
	Mailing Address 1901 Campus Place		Transaction ID: 123010-36		
	City Louisville	State KY	Zip Code 40299	Amount of Each Receipt this Period 115.39	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Pharmerica		Occupation SVP Chief Information Of			
		Aggregate Year-to-Date ▼ 3000.14			

SUBTOTAL of Receipts This Page (optional)

346.17

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 24 / 45

(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) Jeffrey Kimmell 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 VP Clinical Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 372.00	Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 1 0 Transaction ID: 120310-30 Amount of Each Receipt this Period 31.00
B.	Full Name (Last, First, Middle Initial) Jeffrey Kimmell 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 VP Clinical Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 372.00	Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 1 0 Transaction ID: 121710-30 Amount of Each Receipt this Period 31.00
C.	Full Name (Last, First, Middle Initial) Jeffrey Kimmell 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 VP Clinical Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 372.00	Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 1 0 Transaction ID: 123010-31 Amount of Each Receipt this Period 31.00

SUBTOTAL of Receipts This Page (optional) ▶

93.00

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

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

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

FOR LINE NUMBER: PAGE 25 / 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Michael Koski
 Mailing Address 5255 East River Road Suite 204
 City State Zip Code
 Fridley MN 55421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pharmerica Pharmacy Ops Manager
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 546.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 6 / 2 0 1 0
Transaction ID: 112610-7
 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
 Fridley MN 55421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pharmerica Pharmacy Ops Manager
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 546.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 0 / 2 0 1 0
Transaction ID: 121010-7
 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
 Fridley MN 55421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pharmerica Pharmacy Ops Manager
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 546.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 3 / 2 0 1 0
Transaction ID: 122310-6
 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 26 / 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
William Lademann

Mailing Address 1901 Campus Place

City State Zip Code
Louisville KY 40299

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

Name of Employer Hospital Pharm Services (OH) Occupation SVP Hospital Pharmacy Se

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2436.00

Date of Receipt: 12 / 03 / 2010
Transaction ID: 120310-24
Amount of Each Receipt this Period: 116.00

B. Full Name (Last, First, Middle Initial)
William Lademann

Mailing Address 1901 Campus Place

City State Zip Code
Louisville KY 40299

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

Name of Employer Hospital Pharm Services (OH) Occupation SVP Hospital Pharmacy Se

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2436.00

Date of Receipt: 12 / 17 / 2010
Transaction ID: 121710-24
Amount of Each Receipt this Period: 116.00

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

Mailing Address 1901 Campus Place

City State Zip Code
Louisville KY 40299

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

Name of Employer Hospital Pharm Services (OH) Occupation SVP Hospital Pharmacy Se

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2436.00

Date of Receipt: 12 / 30 / 2010
Transaction ID: 123010-25
Amount of Each Receipt this Period: 116.00

SUBTOTAL of Receipts This Page (optional) ► 348.00

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 / 45
(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)
James Loftin

Mailing Address 1901 Campus Place

City State Zip Code
Louisville KY 40299

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

Name of Employer REGIONAL OH Occupation VP LTC Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 738.48

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

Transaction ID: 120310-14

Amount of Each Receipt this Period
30.77

B.

Full Name (Last, First, Middle Initial)
James Loftin

Mailing Address 1901 Campus Place

City State Zip Code
Louisville KY 40299

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

Name of Employer REGIONAL OH Occupation VP LTC Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 738.48

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

Transaction ID: 121710-14

Amount of Each Receipt this Period
30.77

C.

Full Name (Last, First, Middle Initial)
James Loftin

Mailing Address 1901 Campus Place

City State Zip Code
Louisville KY 40299

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

Name of Employer REGIONAL OH Occupation VP LTC Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 738.48

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

Transaction ID: 123010-14

Amount of Each Receipt this Period
30.77

SUBTOTAL of Receipts This Page (optional) ► **92.31**

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 / 45
(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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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 Marshall

Mailing Address 230 Westway Place Ste 105

City State Zip Code
Arlington TX 76018

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

Name of Employer Occupation
PharMerica VP Client Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 923.04

Date of Receipt
MM / DD / YYYY
12 / 03 / 2010

Transaction ID: 120310-37

Amount of Each Receipt this Period
38.46

B.

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

Mailing Address 230 Westway Place Ste 105

City State Zip Code
Arlington TX 76018

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

Name of Employer Occupation
PharMerica VP Client Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 923.04

Date of Receipt
MM / DD / YYYY
12 / 17 / 2010

Transaction ID: 121710-37

Amount of Each Receipt this Period
38.46

C.

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

Mailing Address 230 Westway Place Ste 105

City State Zip Code
Arlington TX 76018

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

Name of Employer Occupation
PharMerica VP Client Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 923.04

Date of Receipt
MM / DD / YYYY
12 / 30 / 2010

Transaction ID: 123010-38

Amount of Each Receipt this Period
38.46

SUBTOTAL of Receipts This Page (optional) ► **115.38**

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 29 / 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

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 Sales & Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2999.88

Date of Receipt
MM / DD / YYYY
12 / 03 / 2010

Transaction ID: 120310-28

Amount of Each Receipt this Period
115.38

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

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 Sales & Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2999.88

Date of Receipt
MM / DD / YYYY
12 / 17 / 2010

Transaction ID: 121710-28

Amount of Each Receipt this Period
115.38

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

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 Sales & Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2999.88

Date of Receipt
MM / DD / YYYY
12 / 30 / 2010

Transaction ID: 123010-29

Amount of Each Receipt this Period
115.38

SUBTOTAL of Receipts This Page (optional) ► **346.14**

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 30 / 45
(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) William Monast		Date of Receipt MM / DD / YYYY 12 / 03 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 120310-39
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer Pharmerica Executives	Occupation EVP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.80	

B.

Full Name (Last, First, Middle Initial) William Monast		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 121710-39
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer Pharmerica Executives	Occupation EVP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.80	

C.

Full Name (Last, First, Middle Initial) William Monast		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 123010-40
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer Pharmerica Executives	Occupation EVP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.80	

SUBTOTAL of Receipts This Page (optional)	576.90
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 31 / 45
(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 Moss		Date of Receipt MM / DD / YYYY 12 / 03 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 120310-31
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.30
Name of Employer Pharmerica	Occupation Dir Benefits	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.80	

B.

Full Name (Last, First, Middle Initial) Christopher Moss		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 121710-31
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.30
Name of Employer Pharmerica	Occupation Dir Benefits	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.80	

C.

Full Name (Last, First, Middle Initial) Christopher Moss		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 123010-32
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.30
Name of Employer Pharmerica	Occupation Dir Benefits	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.80	

SUBTOTAL of Receipts This Page (optional)	▶	51.90
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 45		
	<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

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) Robert Nolan		Date of Receipt
	Mailing Address 3802 Corporex Park Dr. Ste 200		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tampa	FL	33619
	FEC ID number of contributing federal political committee. C		Transaction ID: 120310-38
Name of Employer PharMerica		Occupation VP Compliance	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="800.02"/>	<input type="text" value="30.77"/>

B.	Full Name (Last, First, Middle Initial) Robert Nolan		Date of Receipt
	Mailing Address 3802 Corporex Park Dr. Ste 200		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tampa	FL	33619
	FEC ID number of contributing federal political committee. C		Transaction ID: 121710-38
Name of Employer PharMerica		Occupation VP Compliance	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="800.02"/>	<input type="text" value="30.77"/>

C.	Full Name (Last, First, Middle Initial) Robert Nolan		Date of Receipt
	Mailing Address 3802 Corporex Park Dr. Ste 200		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tampa	FL	33619
	FEC ID number of contributing federal political committee. C		Transaction ID: 123010-39
Name of Employer PharMerica		Occupation VP Compliance	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="800.02"/>	<input type="text" value="30.77"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="92.31"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 45

(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) Christopher Novak		Date of Receipt MM / DD / YYYY 11 / 26 / 2010
	Mailing Address 1901 Campus Place		Transaction ID: 112610-1
	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 Consultant Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.04	

B.	Full Name (Last, First, Middle Initial) Christopher Novak		Date of Receipt MM / DD / YYYY 12 / 10 / 2010
	Mailing Address 1901 Campus Place		Transaction ID: 121010-1
	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 Consultant Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.04	

C.	Full Name (Last, First, Middle Initial) Christopher Novak		Date of Receipt MM / DD / YYYY 12 / 23 / 2010
	Mailing Address 1901 Campus Place		Transaction ID: 122310-1
	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 Consultant Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.04	

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 34 / 45
(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)
Michelle P Orkline
 Mailing Address 5100 Campus Dr
 City State Zip Code
 Plymouth Meeting PA 19462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PharMerica (Plymouth Mtg.) Dir Pharmacy
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 363.30
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 3 / 2 0 1 0
Transaction ID: 120310-6
 Amount of Each Receipt this Period
 17.30

B. Full Name (Last, First, Middle Initial)
Michelle P Orkline
 Mailing Address 489 Shoemaker Road Suite 106
 City State Zip Code
 King of Prussia PA 19406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PharMerica (Plymouth Mtg.) Dir Pharmacy
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 363.30
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 7 / 2 0 1 0
Transaction ID: 121710-6
 Amount of Each Receipt this Period
 17.30

C. Full Name (Last, First, Middle Initial)
Michelle P Orkline
 Mailing Address 489 Shoemaker Road Suite 106
 City State Zip Code
 King of Prussia PA 19406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PharMerica (Plymouth Mtg.) Dir Pharmacy
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 363.30
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 1 0
Transaction ID: 123010-6
 Amount of Each Receipt this Period
 17.30

SUBTOTAL of Receipts This Page (optional) ► 51.90
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 45
(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)
Jay Palin

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 Vice President, Ltc Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
MM / DD / YYYY
12 / 03 / 2010

Transaction ID: 120310-16

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Jay Palin

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 Vice President, Ltc Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
MM / DD / YYYY
12 / 17 / 2010

Transaction ID: 121710-16

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Jay Palin

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 Vice President, Ltc Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
MM / DD / YYYY
12 / 30 / 2010

Transaction ID: 123010-16

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 45
(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) Brian Pate		Date of Receipt MM / DD / YYYY 12 / 03 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 120310-27
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.30
Name of Employer Pharmerica	Occupation Dir Financial Reporting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.80	

B.

Full Name (Last, First, Middle Initial) Brian Pate		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 121710-27
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.30
Name of Employer Pharmerica	Occupation Dir Financial Reporting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.80	

C.

Full Name (Last, First, Middle Initial) Brian Pate		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
Mailing Address 1901 Campus Place		Transaction ID: 123010-28
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.30
Name of Employer Pharmerica	Occupation Dir Financial Reporting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.80	

SUBTOTAL of Receipts This Page (optional)	▶	51.90
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 / 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Kirk M. Pompeo

Mailing Address 3802 Corporex Park Dr. Ste 200

City Tampa State FL Zip Code 33619

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

Name of Employer Ltc Sales & Mktg Vp Occupation VP LTC Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 738.48

Date of Receipt 12 / 03 / 2010

Transaction ID: 120310-40

Amount of Each Receipt this Period 30.77

B. Full Name (Last, First, Middle Initial)
Kirk M. Pompeo

Mailing Address 3802 Corporex Park Dr. Ste 200

City Tampa State FL Zip Code 33619

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

Name of Employer Ltc Sales & Mktg Vp Occupation VP LTC Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 738.48

Date of Receipt 12 / 17 / 2010

Transaction ID: 121710-40

Amount of Each Receipt this Period 30.77

C. Full Name (Last, First, Middle Initial)
Kirk M. Pompeo

Mailing Address 3802 Corporex Park Dr. Ste 200

City Tampa State FL Zip Code 33619

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

Name of Employer Ltc Sales & Mktg Vp Occupation VP LTC Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 738.48

Date of Receipt 12 / 30 / 2010

Transaction ID: 123010-41

Amount of Each Receipt this Period 30.77

SUBTOTAL of Receipts This Page (optional) ► 92.31

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 / 45
(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) Kari Shanard-Koenders		Date of Receipt MM / DD / YYYY 12 / 03 / 2010
Mailing Address 1900 Campus Place		Transaction ID: 120310-17
City LOUISVILLE	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Utilization Management Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 524.94	

B.

Full Name (Last, First, Middle Initial) Kari Shanard-Koenders		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
Mailing Address 1900 Campus Place		Transaction ID: 121710-17
City LOUISVILLE	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Utilization Management Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 524.94	

C.

Full Name (Last, First, Middle Initial) Kari Shanard-Koenders		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
Mailing Address 1900 Campus Place		Transaction ID: 123010-17
City LOUISVILLE	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Utilization Management Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 524.94	

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 39 / 45
	<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) Elizabeth O. Shanks		Date of Receipt
	Mailing Address 230 Westway Place Ste 105		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Arlington	TX	76018
	FEC ID number of contributing federal political committee. C		Transaction ID: 120310-9
Name of Employer PharMerica		Occupation Regional Director, Account Management	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="575.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks		Date of Receipt
	Mailing Address 230 Westway Place Ste 105		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Arlington	TX	76018
	FEC ID number of contributing federal political committee. C		Transaction ID: 121710-9
Name of Employer PharMerica		Occupation Regional Director, Account Management	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="575.00"/>	<input type="text" value="25.00"/>

C.	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks		Date of Receipt
	Mailing Address 230 Westway Place Ste 105		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Arlington	TX	76018
	FEC ID number of contributing federal political committee. C		Transaction ID: 123010-9
Name of Employer PharMerica		Occupation Regional Director, Account Management	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="575.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 45
(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)
Frank J Smitherman

Mailing Address 3802 Corporex Park Dr. Ste 200

City Tampa State FL Zip Code 33619

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

Name of Employer Inventory Management Occupation VP Inventory Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 923.04

Date of Receipt 12 / 03 / 2010

Transaction ID: 120310-10

Amount of Each Receipt this Period 38.46

B.

Full Name (Last, First, Middle Initial)
Frank J Smitherman

Mailing Address 3802 Corporex Park Dr. Ste 200

City Tampa State FL Zip Code 33619

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

Name of Employer Inventory Management Occupation VP Inventory Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 923.04

Date of Receipt 12 / 17 / 2010

Transaction ID: 121710-10

Amount of Each Receipt this Period 38.46

C.

Full Name (Last, First, Middle Initial)
Frank J Smitherman

Mailing Address 3802 Corporex Park Dr. Ste 200

City Tampa State FL Zip Code 33619

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

Name of Employer Inventory Management Occupation VP Inventory Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 923.04

Date of Receipt 12 / 30 / 2010

Transaction ID: 123010-10

Amount of Each Receipt this Period 38.46

SUBTOTAL of Receipts This Page (optional) ► **115.38**

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 41 / 45

(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 3802 Corporex Park Dr. Ste 200

City State Zip Code
Tampa FL 33619

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

Name of Employer Occupation
Pharmerica Director, Clinical Consulting

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 484.56

Date of Receipt

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

Transaction ID: 120310-7

Amount of Each Receipt this Period

20.19

B.

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

Mailing Address 3802 Corporex Park Dr. Ste 200

City State Zip Code
Tampa FL 33619

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

Name of Employer Occupation
Pharmerica Director, Clinical Consulting

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 484.56

Date of Receipt

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

Transaction ID: 121710-7

Amount of Each Receipt this Period

20.19

C.

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

Mailing Address 3802 Corporex Park Dr. Ste 200

City State Zip Code
Tampa FL 33619

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

Name of Employer Occupation
Pharmerica Director, Clinical Consulting

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 484.56

Date of Receipt

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

Transaction ID: 123010-7

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 42 / 45
(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)
Berard Tomassetti

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 Chief Accounting Off

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1442.25

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

Transaction ID: 120310-23

Amount of Each Receipt this Period
57.69

B. Full Name (Last, First, Middle Initial)
Berard Tomassetti

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 Chief Accounting Off

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1442.25

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

Transaction ID: 121710-23

Amount of Each Receipt this Period
57.69

C. Full Name (Last, First, Middle Initial)
Berard Tomassetti

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 Chief Accounting Off

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1442.25

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

Transaction ID: 123010-24

Amount of Each Receipt this Period
57.69

SUBTOTAL of Receipts This Page (optional) ► **173.07**

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 43 / 45

(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)
James Wise

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
KPS Overhead VP Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 738.48

Date of Receipt

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

Transaction ID: 120310-36

Amount of Each Receipt this Period
30.77

B.

Full Name (Last, First, Middle Initial)
James Wise

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
KPS Overhead VP Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 738.48

Date of Receipt

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

Transaction ID: 121710-36

Amount of Each Receipt this Period
30.77

C.

Full Name (Last, First, Middle Initial)
James Wise

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
KPS Overhead VP Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 738.48

Date of Receipt

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

Transaction ID: 123010-37

Amount of Each Receipt this Period
30.77

SUBTOTAL of Receipts This Page (optional)

92.31

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 45
(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) Cheryl Zinn		Date of Receipt MM / DD / YYYY 12 / 03 / 2010
Mailing Address 321 W. Ben White Blvd Ste 103		Transaction ID: 120310-18
City Austin	State TX	Zip Code 78704
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 ▼ 524.94	

B.

Full Name (Last, First, Middle Initial) Cheryl Zinn		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
Mailing Address 321 W. Ben White Blvd Ste 103		Transaction ID: 121710-18
City Austin	State TX	Zip Code 78704
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 ▼ 524.94	

C.

Full Name (Last, First, Middle Initial) Cheryl Zinn		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
Mailing Address 321 W. Ben White Blvd Ste 103		Transaction ID: 123010-18
City Austin	State TX	Zip Code 78704
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 ▼ 524.94	

SUBTOTAL of Receipts This Page (optional)	60.57
TOTAL This Period (last page this line number only)	4722.36

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

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

FOR LINE NUMBER:
(check only one)

PAGE 45 / 45

<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

A.

Full Name (Last, First, Middle Initial)
McConnell Senate Committee '14

Mailing Address PO Box 1496

City State Zip Code
Louisville KY 40201

Purpose of Disbursement
2014 Primary

Candidate Name
Mitch McConnell

Office Sought: House
 Senate
 President

State: KY District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: E26F7847D7E58633FEC

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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