

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 06 01 2009 through 06 30 2009

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

Type or Print Name of Treasurer Teri Hartlage

Signature of Treasurer Electronically Filed by Teri Hartlage Date 07 06 2009

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
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	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>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		89014.37
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	112071.22									
(c) Total Receipts (from Line 19) .....	3462.02	24518.87								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	115533.24	113533.24								
7. Total Disbursements (from Line 31) .....	0.00	-2000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	115533.24	115533.24								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

PharMerica Corporation Political Action Committee PPAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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) .....	3096.92	16316.47
(ii) Unitemized .....	365.10	8202.40
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	3462.02	24518.87
(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) .....	3462.02	24518.87
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)) .....	3462.02	24518.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3462.02	24518.87

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	-2000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	-2000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	-2000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 30

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) .....	3462.02	24518.87
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3462.02	24518.87
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: <span style="float: right;">PAGE 7 / 30</span>
(check only one)	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Andrews	Date of Receipt MM / DD / YYYY 06 / 12 / 2009
	Mailing Address 18016 72Nd Avenue South	<b>Transaction ID:</b> 061209-5
	City State Zip Code Kent WA 98032	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: Pharmerica Occupation: Manager, General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Andrews	Date of Receipt MM / DD / YYYY 06 / 26 / 2009
	Mailing Address 18016 72Nd Avenue South	<b>Transaction ID:</b> 062609-5
	City State Zip Code Kent WA 98032	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: Pharmerica Occupation: Manager, General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47

<b>C.</b>	Full Name (Last, First, Middle Initial) Charles Ashy	Date of Receipt MM / DD / YYYY 06 / 05 / 2009
	Mailing Address 1289 N. Post Oak Blvd Ste 130	<b>Transaction ID:</b> 060509-36
	City State Zip Code Houston TX 77055	Amount of Each Receipt this Period 17.30
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: Pharmerica Occupation: Director, Process Improvement Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.90

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>57.68</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 8 / 30
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles Ashy		Date of Receipt
	Mailing Address 1289 N. Post Oak Blvd Ste 130		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 19 / 2009
	City	State	Zip Code
	Houston	TX	77055
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 061909-34
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 ▼ 224.90	<input type="text"/> 17.30

<b>B.</b>	Full Name (Last, First, Middle Initial) Tracy Atkinson		Date of Receipt
	Mailing Address 2720-A Broadbent Parkway		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 05 / 2009
	City	State	Zip Code
	Albuquerque	NM	87107
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 060509-25
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 ▼ 325.00	<input type="text"/> 25.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Tracy Atkinson		Date of Receipt
	Mailing Address 2720-A Broadbent Parkway		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 19 / 2009
	City	State	Zip Code
	Albuquerque	NM	87107
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 061909-23
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 ▼ 325.00	<input type="text"/> 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 67.30
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 30  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) John Baughman</p> <p>Mailing Address 1901 Campus Place</p> <hr/> <p>City State Zip Code <u>Louisville</u> KY 40299</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Lead Consultant</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">350.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 12 / 2009</span></p> <p><b>Transaction ID:</b> 061209-10</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) John Baughman</p> <p>Mailing Address 1901 Campus Place</p> <hr/> <p>City State Zip Code <u>Louisville</u> KY 40299</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Lead Consultant</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">350.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 26 / 2009</span></p> <p><b>Transaction ID:</b> 062609-10</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Hill Boyett</p> <p>Mailing Address 3378 Brookdale Avenue Ste C-H</p> <hr/> <p>City State Zip Code <u>Macon</u> GA 31204</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Manager, General</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">262.47</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 12 / 2009</span></p> <p><b>Transaction ID:</b> 061209-4</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">20.19</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">70.19</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 30  
(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) Hill Boyett		Date of Receipt MM / DD / YYYY 06 / 26 / 2009
Mailing Address 3378 Brookdale Avenue Ste C-H		<b>Transaction ID:</b> 062609-4
City Macon	State GA	Zip Code 31204
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.19
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.47	

**B.**

Full Name (Last, First, Middle Initial) Thomas Caneris		Date of Receipt MM / DD / YYYY 06 / 05 / 2009
Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 060509-33
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 115.38
Name of Employer Pharmerica	Occupation SVP General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.94	

**C.**

Full Name (Last, First, Middle Initial) Thomas Caneris		Date of Receipt MM / DD / YYYY 06 / 19 / 2009
Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 061909-31
City Louisville	State KY	Zip Code 40299
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 115.38
Name of Employer Pharmerica	Occupation SVP General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.94	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>250.95</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 30  
(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)  
Stephen Coffey

Mailing Address 83 Vermont Ave. Unit 2

City State Zip Code  
Warwick RI 02888

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

Name of Employer Occupation  
Pharmerica General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 224.90

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2009

**Transaction ID:** 060509-2

Amount of Each Receipt this Period  
17.30

**B.**

Full Name (Last, First, Middle Initial)  
Stephen Coffey

Mailing Address 83 Vermont Ave. Unit 2

City State Zip Code  
Warwick RI 02888

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

Name of Employer Occupation  
Pharmerica General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 224.90

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2009

**Transaction ID:** 061909-2

Amount of Each Receipt this Period  
17.30

**C.**

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

Mailing Address 12100 Plantside Drive

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2009

**Transaction ID:** 061209-7

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **59.60**

**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 12 / 30  
(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)  
David Cole

Mailing Address 12100 Plantside Drive

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
Pharmerica Manager, General

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2009

**Transaction ID:** 062609-7

Amount of Each Receipt this Period  
25.00

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

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, Regional Reimbursement

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2009

**Transaction ID:** 060509-6

Amount of Each Receipt this Period  
20.19

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

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, Regional Reimbursement

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2009

**Transaction ID:** 061909-6

Amount of Each Receipt this Period  
20.19

**SUBTOTAL** of Receipts This Page (optional) ..... ► **65.38**

**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 13 / 30  
(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)  
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 ▼ 262.47

Date of Receipt 06 / 05 / 2009

**Transaction ID:** 060509-16

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 ▼ 262.47

Date of Receipt 06 / 19 / 2009

**Transaction ID:** 061909-16

Amount of Each Receipt this Period 20.19

**C.**

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

Mailing Address 1901 Campus Place

City Louisville State KY Zip Code 40299

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

Name of Employer PharMerica Occupation Director, Process Improvement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 05 / 2009

**Transaction ID:** 060509-9

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 65.38

**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 14 / 30
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Linda K Gelalia		Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 061909-9
	City Louisville	State KY	Zip Code 40299
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer PharMerica	Occupation Director, Process Improvement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas Griffin		Date of Receipt MM / DD / YYYY 06 / 05 / 2009
	Mailing Address 735 West Highway 434 Suite B		<b>Transaction ID:</b> 060509-13
	City Longwood	State FL	Zip Code 32750
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer PharMerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas Griffin		Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 735 West Highway 434 Suite B		<b>Transaction ID:</b> 061909-13
	City Longwood	State FL	Zip Code 32750
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
	Name of Employer PharMerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Teri Hartlage	Date of Receipt MM / DD / YYYY 06 / 05 / 2009
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 060509-1
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 30.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.01	

<b>B.</b>	Full Name (Last, First, Middle Initial) Teri Hartlage	Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 061909-1
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 30.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.01	

<b>C.</b>	Full Name (Last, First, Middle Initial) Anthony Hernandez	Date of Receipt MM / DD / YYYY 06 / 05 / 2009
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 060509-29
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 115.38
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica SVP Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.94	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	176.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Anthony Hernandez	Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 061909-27
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 115.38
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pharmerica	Occupation SVP Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.94	

<b>B.</b>	Full Name (Last, First, Middle Initial) Denis Holmes	Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 1901 Campus PI	<b>Transaction ID:</b> dc88f723d255e71eda0
	City State Zip Code Louisville KY 40299-2308	Amount of Each Receipt this Period 115.38
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer PHARMERICA EXECUTIVES	Occupation SVP Client Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

<b>C.</b>	Full Name (Last, First, Middle Initial) Pamela Johnson	Date of Receipt MM / DD / YYYY 06 / 05 / 2009
	Mailing Address 2200 Tall Pines Dr Suite 118	<b>Transaction ID:</b> 060509-8
	City State Zip Code Largo FL 33771	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pharmerica	Occupation Manager, General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>255.76</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 30

(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)  
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 ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 9

Transaction ID: 061909-8

Amount of Each Receipt this Period

25.00

**B.**

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

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 Information Of

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.07

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 9

Transaction ID: 060509-38

Amount of Each Receipt this Period

115.39

**C.**

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

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 Information Of

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.07

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 9

Transaction ID: 061909-36

Amount of Each Receipt this Period

115.39

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

255.78

**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 18 / 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey Kimmell		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 06 / 05 / 2009
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 060509-34
Name of Employer Pharmerica		Occupation VP Clinical Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 403.00	<input type="text"/> 31.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffrey Kimmell		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 06 / 19 / 2009
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 061909-32
Name of Employer Pharmerica		Occupation VP Clinical Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 403.00	<input type="text"/> 31.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Barbara Klinkel		Date of Receipt
	Mailing Address 3615 5Th Street Suite 109		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 05 / 2009
	City	State	Zip Code
	Rapid City	SD	57701
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 060509-19
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 ▼ 325.00	<input type="text"/> 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 87.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Barbara Klinkel		Date of Receipt
	Mailing Address 3615 5Th Street Suite 109		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 19 / 2009
	City	State	Zip Code
	Rapid City	SD	57701
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 061909-19
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 ▼ 325.00	<input type="text"/> 25.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Koski		Date of Receipt
	Mailing Address 5255 East River Road Suite 204		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 12 / 2009
	City	State	Zip Code
	Fridlay	MN	55421
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 061209-9
Name of Employer Pharmerica		Occupation Pharmacy Ops Manager	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 ▼ 273.00	<input type="text"/> 21.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Koski		Date of Receipt
	Mailing Address 5255 East River Road Suite 204		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 26 / 2009
	City	State	Zip Code
	Fridlay	MN	55421
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 062609-9
Name of Employer Pharmerica		Occupation Pharmacy Ops Manager	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 ▼ 273.00	<input type="text"/> 21.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 67.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 30  
(check only one)

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

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

**A.**

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

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
PharMerica Svp, Account Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2009

**Transaction ID:** 060509-15

Amount of Each Receipt this Period  
120.00

**B.**

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

Mailing Address 1901 Campus Place

City State Zip Code  
Louisville KY 40299

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

Name of Employer Occupation  
PharMerica Svp, Account Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2009

**Transaction ID:** 061909-15

Amount of Each Receipt this Period  
120.00

**C.**

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

Mailing Address 1901 Campus PI

City State Zip Code  
Louisville KY 40299-2308

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

Name of Employer Occupation  
PharMerica VP Client Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2009

**Transaction ID:** dc3dfefc8c124d6bff1

Amount of Each Receipt this Period  
38.46

**SUBTOTAL** of Receipts This Page (optional) ..... ► 278.46

**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 / 30

(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)  
Mark Marshall

Mailing Address 1901 Campus PI

City State Zip Code  
Louisville KY 40299-2308

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

Name of Employer Occupation  
Pharmerica VP Client Services

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 499.98

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 9

Transaction ID: a1e40dd10460e7b5c4e

Amount of Each Receipt this Period

38.46

**B.**

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

Mailing Address 3410 E. Twelve Mile Rd Suite A

City State Zip Code  
Warren MI 48092

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 ▼ 262.47

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: 061209-6

Amount of Each Receipt this Period

20.19

**C.**

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

Mailing Address 3410 E. Twelve Mile Rd Suite A

City State Zip Code  
Warren MI 48092

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 ▼ 262.47

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 9

Transaction ID: 062609-6

Amount of Each Receipt this Period

20.19

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

78.84

**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 22 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert McKay	Date of Receipt MM / DD / YYYY 06 / 05 / 2009
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 060509-31
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 115.38
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica SVP Sales & Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.94	

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert McKay	Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 1901 Campus Place	<b>Transaction ID:</b> 061909-29
	City State Zip Code Louisville KY 40299	Amount of Each Receipt this Period 115.38
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica SVP Sales & Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.94	

<b>C.</b>	Full Name (Last, First, Middle Initial) William Monast	Date of Receipt MM / DD / YYYY 06 / 05 / 2009
	Mailing Address 1901 Campus PI	<b>Transaction ID:</b> 91c9580a0d5f0abb88e
	City State Zip Code Louisville KY 40299-2308	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pharmerica Executives EVP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.91	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>423.06</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 30  
(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)  
William Monast

Mailing Address 1901 Campus PI

City State Zip Code  
Louisville KY 40299-2308

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

Name of Employer Occupation  
Pharmerica Executives EVP Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 576.91

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2009

**Transaction ID:** 778973759afc292c966

Amount of Each Receipt this Period  
192.30

**B.**

Full Name (Last, First, Middle Initial)  
Doris Montgomery

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 Dir Information Technology

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 224.90

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2009

**Transaction ID:** 060509-14

Amount of Each Receipt this Period  
17.30

**C.**

Full Name (Last, First, Middle Initial)  
Doris Montgomery

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 Dir Information Technology

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 224.90

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2009

**Transaction ID:** 061909-14

Amount of Each Receipt this Period  
17.30

**SUBTOTAL** of Receipts This Page (optional) ..... ► **226.90**

**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 24 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher Moss		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 05 / 2009
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 060509-35
Name of Employer Pharmerica		Occupation Dir Benefits	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 ▼ 224.90	<input type="text"/> 17.30

<b>B.</b>	Full Name (Last, First, Middle Initial) Christopher Moss		Date of Receipt
	Mailing Address 1901 Campus Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 19 / 2009
	City	State	Zip Code
	Louisville	KY	40299
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 061909-33
Name of Employer Pharmerica		Occupation Dir Benefits	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 ▼ 224.90	<input type="text"/> 17.30

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Nolan		Date of Receipt
	Mailing Address 3802 Corporex Park Dr. Ste 200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 05 / 2009
	City	State	Zip Code
	Tampa	FL	33619
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 060509-40
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 ▼ 400.01	<input type="text"/> 30.77

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 65.37
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 30
	<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)  
Robert Nolan

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 Pharmerica Occupation VP Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.01

Date of Receipt 06 / 19 / 2009

**Transaction ID:** 061909-38

Amount of Each Receipt this Period 30.77

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

Mailing Address 1901 Campus Place

City LOUISVILLE State KY Zip Code 40299

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

Name of Employer Pharmerica Occupation Vice President, Ltc Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 05 / 2009

**Transaction ID:** 060509-17

Amount of Each Receipt this Period 40.00

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

Mailing Address 1901 Campus Place

City LOUISVILLE State KY Zip Code 40299

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

Name of Employer Pharmerica Occupation Vice President, Ltc Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 19 / 2009

**Transaction ID:** 061909-17

Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 110.77

**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 / 30  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brian Pate</p> <p>Mailing Address 1901 Campus Place</p> <p>City State Zip Code Louisville KY 40299</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Dir Financial Reporting</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">224.90</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 6 / 0 5 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> 060509-30</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">17.30</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Brian Pate</p> <p>Mailing Address 1901 Campus Place</p> <p>City State Zip Code Louisville KY 40299</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Dir Financial Reporting</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">224.90</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 6 / 1 9 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> 061909-28</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">17.30</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Kari Shanard-Koenders</p> <p>Mailing Address 1900 Campus Place</p> <p>City State Zip Code LOUISVILLE KY 40299</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Pharmerica Utilization Management Director</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">262.47</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 6 / 0 5 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> 060509-20</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.19</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">54.79</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kari Shanard-Koenders		Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 1900 Campus Place		<b>Transaction ID:</b> 061909-20
	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 ▼ 262.47	

<b>B.</b>	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks		Date of Receipt MM / DD / YYYY 06 / 05 / 2009
	Mailing Address 3802 Corporex Park Dr. Ste 200		<b>Transaction ID:</b> 060509-10
	City Tampa	State FL	Zip Code 33619
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer PharMerica	Occupation Regional Director, Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Elizabeth O. Shanks		Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 3802 Corporex Park Dr. Ste 200		<b>Transaction ID:</b> 061909-10
	City Tampa	State FL	Zip Code 33619
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer PharMerica	Occupation Regional Director, Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Wendy Stearns	Date of Receipt MM / DD / YYYY 06 / 05 / 2009
	Mailing Address 3802 Corporex Park Dr. Ste 200	<b>Transaction ID:</b> 060509-7
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: Pharmerica Occupation: Director, Clinical Consulting Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 262.47	

<b>B.</b>	Full Name (Last, First, Middle Initial) Wendy Stearns	Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 3802 Corporex Park Dr. Ste 200	<b>Transaction ID:</b> 061909-7
	City State Zip Code Tampa FL 33619	Amount of Each Receipt this Period 20.19
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: Pharmerica Occupation: Director, Clinical Consulting Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 262.47	

<b>C.</b>	Full Name (Last, First, Middle Initial) Berard Tomassetti	Date of Receipt MM / DD / YYYY 06 / 05 / 2009
	Mailing Address 1901 Campus PI	<b>Transaction ID:</b> 0a0ee5510420d7c8f3c
	City State Zip Code Louisville KY 40299-2308	Amount of Each Receipt this Period 57.69
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: Pharmerica Occupation: SVP Chief Accounting Off Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 749.97	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>98.07</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Berard Tomassetti		Date of Receipt MM / DD / YYYY 06 / 19 / 2009		
	Mailing Address 1901 Campus PI		<b>Transaction ID:</b> 207d6afb830d62a7943		
	City Louisville	State KY	Zip Code 40299-2308	Amount of Each Receipt this Period 57.69	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Pharmerica	Occupation SVP Chief Accounting Off			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 749.97			

<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen Welch		Date of Receipt MM / DD / YYYY 06 / 05 / 2009		
	Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 060509-32		
	City Louisville	State KY	Zip Code 40299	Amount of Each Receipt this Period 19.23	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Pharmerica	Occupation Dir Tax Compl			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.99			

<b>C.</b>	Full Name (Last, First, Middle Initial) Stephen Welch		Date of Receipt MM / DD / YYYY 06 / 19 / 2009		
	Mailing Address 1901 Campus Place		<b>Transaction ID:</b> 061909-30		
	City Louisville	State KY	Zip Code 40299	Amount of Each Receipt this Period 19.23	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Pharmerica	Occupation Dir Tax Compl			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.99			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	96.15
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 30 / 30  
(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)  
Cheryl Zinn

Mailing Address 321 W. Ben White Blvd Ste 103

City State Zip Code  
Austin TX 78704

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 ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2009

**Transaction ID:** 060509-21

Amount of Each Receipt this Period  
20.19

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

Mailing Address 321 W. Ben White Blvd Ste 103

City State Zip Code  
Austin TX 78704

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 ▼ 262.47

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2009

**Transaction ID:** 061909-21

Amount of Each Receipt this Period  
20.19

**SUBTOTAL** of Receipts This Page (optional) ..... ► **40.38**

**TOTAL** This Period (last page this line number only) ..... ► **3096.92**