

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)

A.	Full Name (Last, First, Middle Initial) FRIENDS OF ROY BLUNT Mailing Address P.O. BOX 50100 City Springfield State MO Zip Code 65905 Purpose of Disbursement <input type="text" value="011"/> Candidate Name FRIENDS OF ROY BLUNT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 07	Transaction ID: EXP.B.54584 Date of Disbursement <input type="text" value="10"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="08"/> Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
B.	Full Name (Last, First, Middle Initial) WE THE PEOPLE PAC Mailing Address P.O. BOX 2232 City JENKINTOWN State PA Zip Code 19046 Purpose of Disbursement <input type="text" value="011"/> Candidate Name WE THE PEOPLE PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: EXP.B.54582 Date of Disbursement <input type="text" value="10"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="08"/> Amount of Each Disbursement this Period <input type="text" value="5000.00"/>
C.	Full Name (Last, First, Middle Initial) XAVIER BACERRA FOR CONGRESS Mailing Address PO BOX 261060 City Los Angeles State CA Zip Code 90026 Purpose of Disbursement <input type="text" value="011"/> Candidate Name XAVIER BACERRA FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 31	Transaction ID: EXP.B.54581 Date of Disbursement <input type="text" value="10"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="08"/> Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text" value="7000.00"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>