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## FEC FORM 3X

FE6AN026

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) 2350 KERNER BLVD., SUITE 250 ADDRESS (number and street) Check if different than previously SAN RAFAEL CA 94901 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00384362 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 03 0 1 2010 03 3 1 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Jason D. Kaune Type or Print Name of Treasurer Electronically Filed by Jason D. Kaune 04 16 2010 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 12/2004) Only

## SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS 2 / 201

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

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

D D 0 1 2010 03 2010 0.3 31 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 671416.04 January 1 (b) Cash on Hand at 715772.26 Begining of Reporting Period ..... 62883.87 194740.09 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 778656.13 866156.13 6(a) and 6(c) for Column B) ..... 84532.55 172032.55 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 694123.58 694123.58 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 1101.75 Schedule C and/or Schedule D) .....

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

### For further information contact:

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

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

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 201

Write or Type Committee Name

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

Report Covering the Period: From:

M M M 0 3 0 1 2 0 1 0 To:

To:

M M M 0 3 1 2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:     (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	46926.81	109971.60
(ii) Unitemized	15927.64	84691.53
(iii) TOTAL (add Lines 11(a)(i) and (ii)	62854.45	194663.13
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	62854.45	194663.13
Transfers From Affiliated/Other     Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received     Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	29.42	76.96
3. 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
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	62883.87	194740.09
). Total Federal Receipts (subtract Line 18(c) from Line 19)	62883.87	194740.09

## **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 201

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating  Expenditures	32.55	32.55
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii) and (b))	32.55	32.55
Transfers to Affiliated/Other Party     Committees	0.00	0.00
3. Contributions to		
Federal Candidates/Committeesand Other Political Committees	54000.00	139000.00
Independent Expenditure     (use Schedule E)	0.00	0.00
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contribution Refunds	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements	30500.00	33000.00
Section Floring Astricts (OHOO 404(00))		
Federal Election Activity (2 U.S.C 431(20))     (a) Shared Federal Election Activity		
(from Schedule H6)	2.22	
(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	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))		
1. Total Disbursements (add Lines 21(c), 22,	0.4500.55	170000
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	84532.55	172032.55
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	2452255	470000 55
from Line 31)	84532.55	172032.55

## **DETAILED SUMMARY PAGE**

of Disbursements

5 / 201 FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures		
from Line 11(d), page 3)	62854.45	194663.13
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	62854.45	194663.13
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	32.55	32.55
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures     (subtract Line 37 from Line 36)	32.55	32.55

FE6AN026

# SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	o solicit contributions from such committee.
<b>∠</b> <b>A.</b>	Full Name (Last, First, Middle Initial) LYNETTE Y. SNOW  Mailing Address 23 CEDAR GATE RD.  City DARIEN  FEC ID number of contributing federal political committee.  Name of Employer NONE	State CT C	Zip Code 06820	Date of Receipt  M M M O D D O D O D O D O D O D O D O D
_	Receipt For:  Primary General  Other (specify) ▼	HOMEM Aggregate	AKER e Year-to-Date ▼ 5000.00	
3.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 6527 SHORBURGH DI	RIVE		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.77575
	INDIANAPOLIS  FEC ID number of contributing federal political committee.	C	46278	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	on ARM PRACTICE	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 325.00	
	Full Name (Last, First, Middle Initial) MS BARBARA CARIGAN Mailing Address 3898 ERVA ST.			Date of Receipt  0 3 0 6 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.78084
	LAS VEGAS	NV	89147	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)			5050.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial)  MR JASON COLE  Mailing Address 14917 E BELLA VISTA		(a)	Date of Receipt
	City VERADALE	State WA	Zip Code 99037	0 3 0 6 2 0 1 0  Transaction ID: INC.A.77788  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupatio VP/GM Aggregate	e Year-to-Date ▼ 325.00	
Б.	Full Name (Last, First, Middle Initial) MR KENNETH DANIELS Mailing Address 4156 DUNMORE DRIV	Έ		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.77872
	LAKE WALES	FL	33859	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
с. С.	Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA			Date of Receipt
<b>.</b>	Mailing Address 2354 DOLPHIN CT			03 / 06 / 2010
	City HENDERSON	State NV	Zip Code 89074	Transaction ID: INC.A.77804  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	03074	38.47
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n NRM PRACTICE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.11	
	SUBTOTAL of Receipts This Page (optional)			88.47
Ī	TOTAL This Period (last page this line number of	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 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	o solicit contributions from such committee.
,	Full Name (Last, First, Middle Initial)	TOLITIOAL	ACTION COMMITTEE (a.n.a	· 
A.	MR JOSEPH FRENDO  Mailing Address 9 GREEN HILL TRAII	_		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City	State	Zip Code	Transaction ID: INC.A.77876
	TROPHY CLUB  FEC ID number of contributing federal political committee.	C	76262	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP NA	on TIONAL SERVICE CENTER	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
В.	Full Name (Last, First, Middle Initial) MR BERNARD HUKILL Mailing Address 17219 CLOVIS			Date of Receipt
			7' 0 1	03 06 2010
	City <u>HELOTES</u>	State TX	Zip Code 78023	Transaction ID: INC.A.77911  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	on ARM OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]
с. С.	Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
	Mailing Address 12224 MONTCALM S	TREET		03 06 2010
	City CARMEL	State IN	Zip Code 46032	Transaction ID: INC.A.77940  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional) .			125.00
Ī	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 9 / 201   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	CTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
Mailing Address 1066 WEST GRO	VE CT		M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
City	State	Zip Code	Transaction ID: INC.A.77699
GIBSONIA  FEC ID number of contributing federal political committee.	C	15044	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) MRS CATHY PATTEN			Date of Receipt
Mailing Address 2001 MEADOWS AVENUE			0 3 0 6 2 0 1 0
City LANTANA	State TX	Zip Code	Transaction ID: INC.A.77856
FEC ID number of contributing federal political committee.	C	76226	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS			Date of Receipt
Mailing Address 2780 FOLKSTONE	E ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COLUMBUS	State OH	Zip Code 43220	Transaction ID: INC.A.77658
FEC ID number of contributing federal political committee.	C	40220	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 325.00	
	L		80.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES	MR GILBERT RAINES				
	Mailing Address 800 SANDY TRAIL			03 06 2010		
	City <u>KELLER</u>	State TX	Zip Code 76248	Transaction ID: INC.A.78039  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00			
В.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CREEK	AVE		Date of Receipt		
	City	State	Zip Code	0 3 0 6 2 0 1 0		
	LAS VEGAS	NV	89148	Transaction ID: INC.A.77837  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		60.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ONC	n OLOGY TRC OPS			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 780.00			
с. С.	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE			Date of Receipt		
	Mailing Address 6108 HUNTER LANE			03 06 YYYYY 2010		
	City COLLEYVILLE	State TX	Zip Code 76034	Transaction ID: INC.A.77867  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00			
	SUBTOTAL of Receipts This Page (optional)	1		110.00		
	TOTAL This Period (last page this line number	r only)				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt
	Mailing Address 8362 GOLDEN PRAIR  City	RIE DRIVE State	Zip Code	0 3
	TAMPA	FL	33647	Transaction ID: INC.A.77725  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 650.00	
В.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Date of Receipt
	Mailing Address 5 APPLE ORCHARD F	03 06 2010		
	City	State	Zip Code	Transaction ID: INC.A.77851
	MOORESTOWN	NJ	08057	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]
_ C.	Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI			Date of Receipt
	Mailing Address 6691 DEERVIEW DRI	VE		03 / 06 / Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.77764
	LOVELAND FEC ID number of contributing federal political committee.	OH C	45140	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary  General  Other (specify)		e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)		<b>\</b>	125.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	fo	se separate schedule(s) or each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 12 / 201 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and address	of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS LESLIE ACHTER Mailing Address 821 ALBEMARLE	STREET		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WYCKOFF  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07481	Transaction ID: INC.A.77698  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP ANALYTI Aggregate Year		
Full Name (Last, First, Middle Initial)  MR EDWARD ADAMCIK  Mailing Address 1021 SUNSET RI	DGE		Date of Receipt  0 3
City  BRIDGEWATER  FEC ID number of contributing federal political committee.	State NJ	Zip Code 08807	Transaction ID: INC.A.77607  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation VP PHARM ( Aggregate Year	CONTRACT & CONSUL r-to-Date ▼ 350.00	TING
Full Name (Last, First, Middle Initial) MR STEPHEN ADLER Mailing Address 139 BELLVALE LA	AKES RD		Date of Receipt
City WARWICK FEC ID number of contributing federal political committee.	State NY	Zip Code 10990	Transaction ID: INC.A.77696  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP INFO TEO Aggregate Year		1
SUBTOTAL of Receipts This Page (option	nal)		150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 201 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and add	lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC.  Full Name (Last, First, Middle Initial)	POLITICAL A	CTION COMMITTEE (a.k.a	wedco Health PAC)
A. DR JODY ALLEN			Date of Receipt
Mailing Address 3031 MOUNT HILL D	DR		03 / 13 / 2010
City MIDLOTHIAN	State VA	Zip Code 23113	Transaction ID: INC.A.77695
FEC ID number of contributing federal political committee.	C	23113	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINI	CAL POLICY-GOV AFFAIR	s
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  B. MARENE ALLISON			Date of Receipt
Mailing Address 4405 WISMER ROAI			0 3 1 3 2 0 1 0
City DOYLESTOWN	State PA	Zip Code 18901	Transaction ID: INC.A.78075  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SECU	IRITY & ASSET PROTECTI	 ON
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  C. MR JAMES ALLOCCO			Date of Receipt
Mailing Address 19 ROSS ROAD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.77775
SCARSDALE  FEC ID number of contributing federal political committee.	C	10583	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)			150.00
TOTAL This Period (last page this line number	er 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 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) TEJWANSH ANAND Mailing Address 10 WHIPPOORWILL L	AVE DOAD		Date of Receipt
	City	State	Zip Code	0 3 1 3 2 0 1 0 Transaction ID: INC.A.78035
	CHAPPAQUA	NY	10514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INFO	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- В.	Full Name (Last, First, Middle Initial) DENNIS AUCH			Date of Receipt
	Mailing Address 1981 E. COVEY VIEW	03 / 13 / 2010		
	City	State	Zip Code	Transaction ID: INC.A.78181
	SALT LAKE CITY	UT	84106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP OPS	n	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		350.00	
с. С.	Full Name (Last, First, Middle Initial) ERIK BAGIN			Date of Receipt
	Mailing Address 73 HIGHLAND AVENU	E		03 / 13 / 2010
	City	State	Zip Code	Transaction ID: INC.A.78080
	GLEN RIDGE  FEC ID number of contributing federal political committee.	NJ C	07028	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
-	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	(Crieck Only One)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any g the name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL ACTION COMMITTEE	(a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS BECKIE BARATKO		Date of Receipt
Mailing Address 80 N. WOODLANI	O STREET	03 13 2010
City ENGLEWOOD	State Zip Code NJ 07631	Transaction ID: INC.A.77961  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROPOSAL UNIT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0
Full Name (Last, First, Middle Initial) MR THOMAS BARATTA		Date of Receipt
Mailing Address 69 SKYLINE DR		03 13 2010
City	State Zip Code	Transaction ID: INC.A.77881
UPPER SADDLE RIVER  FEC ID number of contributing federal political committee.	NJ 07458	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.0	0
Full Name (Last, First, Middle Initial) MS ROBYN BARILLARI		Date of Receipt
Mailing Address 3 DELANEY COUR	RT	03 13 2010
City	State Zip Code	Transaction ID: INC.A.78086
BRIDGEWATER  FEC ID number of contributing federal political committee.	NJ 08807	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MEDICARE OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0
	al)	130.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.:	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JANE BARLOW Mailing Address 3 AVALON COURT City	State Zip Code	Date of Receipt  0 3 1 3 2 0 1 0  Transaction ID: INC.A.78121
HOPEWELL JUNCTION  FEC ID number of contributing federal political committee.	NY 12533	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP MEDICAL POLICIES  Aggregate Year-to-Date   350.00	
Full Name (Last, First, Middle Initial) MR MICHAEL BARONE Mailing Address 452 MEDWAY ROAI	)	Date of Receipt  0 3
City HIGHLAND HEIGHTS FEC ID number of contributing federal political committee.	State Zip Code OH 44143	Transaction ID: INC.A.78156  Amount of Each Receipt this Period  192.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation SVP & GENERAL MGR  Aggregate Year-to-Date ▼  1344.00	
Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR DAVID BAUGH  Mailing Address 1813 ADONIS AVE		Date of Receipt  0 3 1 3 2 0 1 0
City HENDERSON FEC ID number of contributing	State Zip Code NV 89074	Transaction ID: INC.A.78018  Amount of Each Receipt this Period  58.00
name of Employer MEDCO HEALTH SOLUTIONS	Occupation MGR BENEFIT DELIVERY SYSTEM	15
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 406.00	
SURTOTAL of Receipts This Page (optional)		300.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) MR PETER BEGANS Mailing Address 1605 CHARNITA CT  City VIENNA FEC ID number of contributing federal political committee.	State VA	Zip Code 22182	Date of Receipt  0 3 1 3 2 0 1 0  Transaction ID: INC.A.77842  Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>- '</del>	n ERNMENT AFFAIRS e Year-to-Date ▼ 600.00	
	Full Name (Last, First, Middle Initial) MR STEPHEN BELL Mailing Address 24 GLENWOOD ROA	AD		Date of Receipt  0 3 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.78038
	UPPER SADDLE RIVER FEC ID number of contributing	NJ	07458	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA		7
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) INDERPAL BHANDARI Mailing Address 220 ARDSLEY ROAD	1		Date of Receipt  0 3 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.78103
	SCARSDALE FEC ID number of contributing federal political committee.	C	10583	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	<del>, '</del>	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 201 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN Mailing Address 4520 LINWOOD LAN  City DEEPHAVEN FEC ID number of contributing	State MN	Zip Code 55331	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary  Other (specify) ▼	Occupatio SVP CLI	n ENT & MKT STRATEGIC DE e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN Mailing Address 50 NEW ENGLAND C  City RAMSEY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupatio VP MKTI	Zip Code 07446 n ING & PRODUCT DEV e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.77833  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  MR STEVEN BLOOM  Mailing Address 17818 ARBOR GREE  City  TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State FL  C  Occupatio VP FIELI		Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 1 3 2 0 1 0  Transaction ID: INC.A.77832  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line numbe		•	150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 19 / 201   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) KEN BODMER			Date of Receipt
Mailing Address P.O. BOX 381947			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GERMANTOWN	State TN	Zip Code 38183	Transaction ID: INC.A.77924  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.00
Name of Employer ACCREDO HEALTH GROUP	Occupation COO - A	n CCREDO HEALTH GROUP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1344.00	
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX	I		Date of Receipt
Mailing Address 6527 SHORBURGI	H DRIVE		03 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City INDIANAPOLIS	State IN	Zip Code 46278	Transaction ID: INC.A.77576
FEC ID number of contributing federal political committee.	C	40270	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n .RM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	e Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN			Date of Receipt
Mailing Address 5259 FISHERCRES	ST LN		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RICHMOND	State VA	Zip Code 23231	Transaction ID: INC.A.77969  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20201	200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FORI	n MULARY CONSULTING	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1400.00	
SUBTOTAL of Receipts This Page (optional	al)		417.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 201 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS HEIDI BOWMAN  Mailing Address 15 DAWN LANE  City	State	Zip Code	Date of Receipt  0 3
RINGWOOD  FEC ID number of contributing federal political committee.	NJ C	07456	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		n R STRAT PRODUCT MGMT Year-to-Date ▼ 350.00	]
Full Name (Last, First, Middle Initial)  MS PATRICIA BRANUM  Mailing Address 210 FROG HOLLO	W ROAD		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.77951
COATESVILLE  FEC ID number of contributing federal political committee.	C	19320	Amount of Each Receipt this Period  85.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	- + ·	n & PROCESS ENGINEERIN 9 Year-to-Date ▼ 595.00	IG
Full Name (Last, First, Middle Initial) MR JOHN BRENNAN			Date of Receipt
Mailing Address 2 CARMEN LANE			03 13 2010
City	State	Zip Code	Transaction ID: INC.A.78063
FLEMINGTON  FEC ID number of contributing federal political committee.	NJ C	08822	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP AUDI		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
			185.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MR KENNETH BROWN Mailing Address 540 GIORDANO DRIV	/F		Date of Receipt
		v <b>–</b>		03 13 2010
	City YORKTOWN HEIGHTS	State NY	Zip Code 10598	Transaction ID: INC.A.77663  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ENTE	n ERPRISE BUS INTELLIGEN	— C€
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
_	Full Name (Last, First, Middle Initial) AMANDA BUNDY			Date of Receipt
	Mailing Address 5812 SEVEN POINTS	TRACE		03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.78177
	HERMITAGE	TN	37076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP RFIM	n IBURSEMENT	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	350.00	]
	Full Name (Last, First, Middle Initial) MR KEVIN BURON			Date of Receipt
	Mailing Address 25 TIMBERLAND			03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.77807
	ALISO VIEJO	CA	92656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	_	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	]
	SUBTOTAL of Receipts This Page (optional)	-		150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>.</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 22 / 201   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MRS DOREEN CALDER			Date of Receipt
Mailing Address 441 S ELM STREE	Γ		03 13 2010
City MAYWOOD	State NJ	Zip Code 07607	Transaction ID: INC.A.77573  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07007	40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRC	n DDUCT DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI			Date of Receipt
Mailing Address 119 WASHINGTON	I AVENUE		0 3 1 3 2 0 1 0
City CHATHAM	State NJ	Zip Code	Transaction ID: INC.A.77903
FEC ID number of contributing federal political committee.	C	07928	Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ONTROLLER	
Receipt For:  Primary General  Other (specify) ▼	<del>-   '</del>	e Year-to-Date ▼ 1346.17	
Full Name (Last, First, Middle Initial) MS BARBARA CARIGAN			Date of Receipt
Mailing Address 3898 ERVA ST.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LAS VEGAS	State NV	Zip Code 89147	Transaction ID: INC.A.78085  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03147	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optional	)		257.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each	parate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 23 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any	political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR RAYMOND CARLUCCI  Mailing Address 24 SHERI DRIVE	, POLITICAL ACTION C	COMMITTEE (a.k.a	Date of Receipt
City ALLENDALE	State Zip Co NJ 07401		Transaction ID: INC.A.77919  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP	Occupation		52.50
ACCREDO HEALTH GROUP  Receipt For:  Primary General  Other (specify) ▼	GROUP VP MARK Aggregate Year-to-Da		DEV
Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VI	STA		Date of Receipt  0 3
City VERADALE	State Zip Co WA 99037		Transaction ID: INC.A.77789  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	325.00	
Full Name (Last, First, Middle Initial) JEFFREY COOLE Mailing Address 155 ASTON HALL	DRIVE		Date of Receipt  0 3 1 3 2 0 1 0
City EADS	State Zip Co		Transaction ID: INC.A.78175  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP TAX AND REG	ULATORY REPOR	<del></del> २ग
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	ate ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	)		127.50
TOTAL This Period (last page this line num	oer only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 201 (check only one)    X
7	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and add	ress of any political committee to	o solicit contributions from such committee.
<b>∠</b> <b>4</b> .	Full Name (Last, First, Middle Initial) ANTONIO CORREIA Mailing Address 19 WILLIAMS LANE		`	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City CHAPPAQUA  FEC ID number of contributing federal political committee.	State NY	Zip Code 10514	Transaction ID: INC.A.78106  Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation VP BUSIN	NESS DEV Year-to-Date ▼	
_ 3.	Full Name (Last, First, Middle Initial) MRS BARBARA COSGRIFF Mailing Address 2045 MAYFAIR MCLE	AN COURT		Date of Receipt  0 3 1 3 2 0 1 0
	City FALLS CHURCH	State VA	Zip Code 22043	Transaction ID: INC.A.78148  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	195.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PUB	LIC POL&EXTRNL AFFAIF	RS
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1365.00	
- ;.	Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN Mailing Address 25 FAIRWAY TRAIL			Date of Receipt  0 3 1 3 2 0 1 0
	City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.77776  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07071	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHA	RMACY NETWORK MGM	Г
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.17	
	SUBTOTAL of Receipts This Page (optional)			437.31

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 201 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to committee. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR HART COVEN Mailing Address 28 OAK LANE  City MORRISTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07960  C  Occupation VP BIAC  Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.77888  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR ROBERT CRAIG Mailing Address 7979 E SANTA CAT  City SCOTTSDALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code AZ 85255  C Occupation EXEC DIR PRODUCT	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 1 3 2 0 1 0  Transaction ID: INC.A.77758  Amount of Each Receipt this Period  60.00
Receipt For:  Primary General  Other (specify)   Full Name (Last, First, Middle Initial)  MR KENNETH DANIELS  Mailing Address 4156 DUNMORE DI	Aggregate Year-to-Date ▼  420.00  RIVE  State Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y  0 3 1 3 2 0 1 0  Transaction ID: INC.A.77873
LAKE WALES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	FL 33859  C  Occupation VP/GM  Aggregate Year-to-Date ▼  325.00	Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional	)	135.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 201 (check only one)    X
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)  MS MARY DASCHNER  Mailing Address 2926 EWING AVE S			Date of Receipt  0 3
	City MINNEAPOLIS	State MN	Zip Code 55416	Transaction ID: INC.A.77737  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS		PRES RETIREE SOLUTION	IS
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10	
	Full Name (Last, First, Middle Initial) MR ANDREW DAVIS Mailing Address 5616 BROOK DRIVE			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.77755
	EDINA FEC ID number of contributing federal political committee.	C	55439	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP STRA	n ATEGIC INIT/GOVT PROGF	AM
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) MR BARRY DAVIS Mailing Address 11 WEISS DR			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.77963
	TOWACO FEC ID number of contributing federal political committee.	C	07082	Amount of Each Receipt this Period  192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n ENERAL MGR	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1344.00	
	SUBTOTAL of Receipts This Page (optional)			434.30

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and ad	dress of any political committee to	solicit contributions from such committee.
<b>4</b> .	Full Name (Last, First, Middle Initial) MR DANIEL DAVISON			Date of Receipt
	Mailing Address 908 STERLING DRIVI  City	E State	Zip Code	0 3 1 3 2 0 1 0 Towns at least 10 1 NC A 77030
	FRANKLIN LAKES	NJ	07417	Transaction ID: INC.A.77920  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN	n IANCIAL PLANNING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- 3.	Full Name (Last, First, Middle Initial) MR CARLTON DEBRULE Mailing Address 12 OAKLAND DR	1		Date of Receipt
				03 13 2010
	City MONTVALE	State NJ	Zip Code 07645	Transaction ID: INC.A.77965
	FEC ID number of contributing federal political committee.	C	07043	Amount of Each Receipt this Period  55.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUS	n INESS REQUIREMENTS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 385.00	
- ).	Full Name (Last, First, Middle Initial) MICHEL DUFRESNE			Date of Receipt
	Mailing Address 41ELM ST APT 3P			03 / 13 / 2010
	City	State	Zip Code	Transaction ID: INC.A.78041
	MORRISTOWN FEC ID number of contributing federal political committee.	NJ C	07960	Amount of Each Receipt this Period 192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENTI	n ERPRISE BUS INTELLIGEN	— C <b>E</b>
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1346.10	
	SUBTOTAL of Receipts This Page (optional)			297.30
f	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 201 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any per the name and address of any political committee C. POLITICAL ACTION COMMITTEE (a.k.)	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY Mailing Address 14026 KNOX STRE	EET State Zip Code	Date of Receipt  0 3
OVERLAND PARK  FEC ID number of contributing federal political committee.	KS 66221	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP SALES SEGMENT LEADER Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) MR MARK DUNN Mailing Address 2 OLD MILL ROAD		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SANDY HOOK FEC ID number of contributing	State Zip Code CT 06482	Transaction ID: INC.A.77675  Amount of Each Receipt this Period  35.00
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date  245.00	35.00
Full Name (Last, First, Middle Initial)  MR MICHAEL EDWARDS  Mailing Address 109 KAREN PLACE		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WYCKOFF  FEC ID number of contributing federal political committee.	State Zip Code NJ 07481	Transaction ID: INC.A.77662  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	1)	135.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to so the political ACTION COMMITTEE (a.k.a. I	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD Mailing Address 128 SUMMIT AVEN	IUE	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  UPPER MONTCLAIR  FEC ID number of contributing	State Zip Code NJ 07043	Transaction ID: INC.A.78067  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MEDICARE CHIEF MEDICAL OFFICE	50.00 R
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN Mailing Address 359 LONG HILL RO	DAD EAST	Date of Receipt  0 3 1 3 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.78070
BRIARCLIFF MANOR	NY 10510	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP COMMUNICATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN	·	Date of Receipt
Mailing Address 75 TWEED BLVD		03 13 2010
City	State Zip Code	Transaction ID: INC.A.77565
UPPER GRANDVIEW  FEC ID number of contributing federal political committee.	NY 10960	Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CMO SVP MEDICAL&ANLYTC AFFRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1346.17	
	•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 201 (check only one)    X   11a
7	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR SCOTT ERHARDT			Date of Receipt
	Mailing Address 11540 39TH AVE N			03 / 03 / 2010
	City PLYMOUTH	State MN	Zip Code 55441	Transaction ID: INC.A.77761  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R ACCT MGMT	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Б.	Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI Mailing Address 15804 SORAWATER [			Date of Receipt
		03 13 2010		
	City LITHIA	State FL	Zip Code 33547	Transaction ID: INC.A.77684
	FEC ID number of contributing federal political committee.	C	33347	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	CCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
- С.	Full Name (Last, First, Middle Initial) RICHARD FARIS			Date of Receipt
	Mailing Address 2020 HEATHER COVE	Ī		03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.78198
	MEMPHIS  FEC ID number of contributing federal political committee.	C	38119	Amount of Each Receipt this Period  50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP HEAL	1 TH OUTCOME SOLUTIONS	
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
Ī	TOTAL This Period (last page this line number		·	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 201 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and ado	lress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) SUSAN FAUST Mailing Address 6614 HERONSW	OOD COVE		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  MEMPHIS  FEC ID number of contributing	State TN	Zip Code 38119	Transaction ID: INC.A.78167  Amount of Each Receipt this Period  50.00
Receipt For:  Primary  Other (specify)   General	Occupation VP CLIEN	NT SLS AND MGD CARE Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA Mailing Address 2354 DOLPHIN C	T State	Zip Code	Date of Receipt  0 3
HENDERSON FEC ID number of contributing federal political committee.	NV C	89074	Amount of Each Receipt this Period  38.47
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	DIR PHA	RM PRACTICE  Year-to-Date ▼  500.11	
Full Name (Last, First, Middle Initial) DR RICHARD FEIFER Mailing Address 32 EILEEN DR			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  MAHWAH  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07430	Transaction ID: INC.A.77745  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CARE	n E ENHANCING SOLUTIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	nal)		138.47

ITEMIZED RECEIPTS	(3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 201 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and addr	ress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS FEITEL Mailing Address 58 APPLE HILL DR			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GILLETTE  FEC ID number of contributing	State NJ	Zip Code 07933	Transaction ID: INC.A.77808  Amount of Each Receipt this Period
name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP COR	RP MKTG & E-COMM	192.23
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1345.61	
Full Name (Last, First, Middle Initial) MR EDWARD FISCHER Mailing Address 465 OLD STONE R	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y		
City	State	Zip Code	Transaction ID: INC.A.77731
RIDGEWOOD  FEC ID number of contributing federal political committee.	NJ C	07450	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	<del>- ' '</del>	CAL PROD INTEGRATION	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MEGHAN FITZGERALD			Date of Receipt
Mailing Address 6 MORGAN AVE			03 / 13 / 2010
City NORWALK	State CT	Zip Code	Transaction ID: INC.A.78128
FEC ID number of contributing federal political committee.	C	06851	Amount of Each Receipt this Period  192.31
Name of Employer MEDCO HEALTH SOLUTIONS		INESS DEVELOPMENT	
Receipt For:  Primary General  Other (specify)	Aggregate `	Year-to-Date ▼ 1346.17	
	•		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to NC. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) KEVIN FRANCO  Mailing Address 140 BELLAIR ROUNIT Q City RIDGEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07450  C  Occupation SR DIR FINANCE  Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.77936  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO Mailing Address 9 GREEN HILL TF  City TROPHY CLUB  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code TX 76262  C  Occupation SVP NATIONAL SERVICE CENTER Aggregate Year-to-Date  650.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL Mailing Address 1434 NARRAGAN  City CRANSTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code RI 02905  C  Occupation DIR GOV AFFAIRS  Aggregate Year-to-Date  210.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.77694  Amount of Each Receipt this Period  30.00
SUBTOTAL of Receipts This Page (option	nal)	130.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) FELIX FRUEH			Date of Receipt
	Mailing Address 14401 FALLING LEAF	03 / 13 / 2010		
	City DARNESTOWN	State MD	Zip Code 20878	Transaction ID: INC.A.78129  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP RESI	n EARCH & DEVELOPMENT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Б.	Full Name (Last, First, Middle Initial) MR TRACY FURGIUELE Mailing Address 7773 TILLINGHAST DI	RIVE		Date of Receipt
		03 13 2010		
	City DUBLIN	State OH	Zip Code 43017	Transaction ID: INC.A.77955  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & C	n HIEF PHARMACIST	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 245.00	
С. С.	Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI			Date of Receipt
	Mailing Address 24 MOREHOUSE PL			0 3
	City NEW PROVIDENCE	State NJ	Zip Code 07974	Transaction ID: INC.A.77561
	FEC ID number of contributing federal political committee.	C	07974	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP & CC		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			135.00
	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 35 / 201   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI			Date of Receipt
Mailing Address 720 N. LARRABEE APT 1701			03 13 2010
City CHICAGO	State IL	Zip Code 60654	Transaction ID: INC.A.78013  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.17	
Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO			Date of Receipt
Mailing Address 69 LAKEVIEW DR	03 / 13 / 2010		
City OLD TAPPAN	State NJ	Zip Code 07675	Transaction ID: INC.A.77853  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07073	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIE	n NT RELATIONS	
Receipt For:  Primary General  Other (specify) ▼	_ , '	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MICHAEL GALVIN			Date of Receipt
Mailing Address 25 BALLYMEADE F	ROAD		M M / D D / Y Y Y Y Y O D D / 2010
City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.78046  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/CHI	1 EF INFRASTRUCTURE OF	─ FR
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.17	
SUBTOTAL of Receipts This Page (optiona	)		434.62

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 201 (check only one)    X
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR PETER GAYLORD  Mailing Address 1201 BRIDGE STI	REET	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  ASBURY PARK  FEC ID number of contributing	State Zip Code NJ 07712	Transaction ID: INC.A.77560  Amount of Each Receipt this Period  60.00
Receipt For:  Primary  Other (specify) ▼	Occupation SVP TREASURY & FINANCIAL EVAL Aggregate Year-to-Date  420.00	
Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA Mailing Address 20 BROOKSHIRE	DR	Date of Receipt  0 3 1 3 2 0 1 0
City ROBBINSVILLE FEC ID number of contributing federal political committee.	State Zip Code NJ 08691	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP/GM  Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial)  MATTHEW GIBBS  Mailing Address 27 N. WACKER D	R.	Date of Receipt  0 3
SUITE 246 City CHICAGO FEC ID number of contributing federal political committee.	State Zip Code IL 60606	Transaction ID: INC.A.78116  Amount of Each Receipt this Period  75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF CLINICAL OFFICER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
SUBTOTAL of Receipts This Page (option	nal)	185.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 37/201   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR THOMAS GILSON			Date of Receipt
Mailing Address 2 PELL FARM ROA	<b>ND</b>		03 13 2010
City	State	Zip Code	Transaction ID: INC.A.78005
SADDLE RIVER FEC ID number of contributing federal political committee.	NJ C	07458	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 1346.17	
Full Name (Last, First, Middle Initial) MR SCOTT GILYARD			Date of Receipt
Mailing Address 305 BERGAMOT D	RIVE		0 3 1 3 2 0 1 0
City MEDINA	State MN	Zip Code 55340	Transaction ID: INC.A.77566  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33370	192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES UP		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1346.10	
Full Name (Last, First, Middle Initial) MR JONAH GITLITZ			Date of Receipt
Mailing Address 43 OVERLOOK RIE	DGE		0 3 1 3 2 0 1 0
City OAKLAND	State NJ	Zip Code	Transaction ID: INC.A.77647
FEC ID number of contributing federal political committee.	C	07436	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n LACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optiona			434.61

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
(	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)  MR PAUL GOERDT  Mailing Address 1700 SUNRISE COLIF			Date of Receipt
	Mailing Address 1700 SUNRISE COUR	11		03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.77820
	BURNSVILLE	MN	55306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
_ 3.	Full Name (Last, First, Middle Initial) MR JAMES GRANT, II			Date of Receipt
	Mailing Address 1928 BEVERLY LANE	<u> </u>		03 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.77722
	BUFFALO GROVE	IL	60089	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		NCIAL INSIGHTS	
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼	0 0	350.00	
- :.	Full Name (Last, First, Middle Initial) MS GINA GRUHN	•		Date of Receipt
	Mailing Address 13 WEATHER VANE	DRIVE		03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.77796
	CONVENT STATION	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>, '</del>	IAL VP SALES-SYSTEMED	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		280.00	
Г		1		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any perse name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.:	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS TRACY GRUNSFELD  Mailing Address 264 HARVEST AVE  City  STATEN ISLAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NY 10310  C  Occupation VP CONSUMER DRIVEN MKTS  Aggregate Year-to-Date   350.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR RICHARD GUIOR  Mailing Address 50 BELLEVUE AVE  City SUMMIT  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07901  C  Occupation GROUP COO  Aggregate Year-to-Date   630.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MS VALERIE HAERTEL  Mailing Address 7 PARSLOE COURT  City MAHWAH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07430  C  Occupation VP INVESTOR RELATIONS Aggregate Year-to-Date  350.00	Date of Receipt  M M M
SUBTOTAL of Receipts This Page (optional)		190.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 201 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. F	OLITICAL A	ACTION COMMITTEE (a.k.a	i. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GREGORY HANSEN			Date of Receipt
Mailing Address 1659 ISABELLA PARK	WAY		03 / 13 / 2010
City	State	Zip Code	Transaction ID: INC.A.78012
CHASKA	MN	55318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACC	n ΓSVCS & ADMIN	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		350.00	]
Full Name (Last, First, Middle Initial) MS SHANA HART	l		Date of Receipt
Mailing Address 4120 JACKSBORO			03 13 2010
City	State	Zip Code	Transaction ID: INC.A.77791
SNYDER	TX	79549	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	ACCT EXEC	
Receipt For:  Primary General  Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR PETER HARTY			Date of Receipt
Mailing Address 19520 YELLOW WING	G COURT		03 13 2010
City	State	Zip Code	Transaction ID: INC.A.77563
COLORADO SPRINGS	CO	80908	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP GOV	n ERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1346.17	
SUBTOTAL of Receipts This Page (optional)			292.31

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 41 / 201 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS HEKKER Mailing Address 28 WEST THRID ST  City SOUTH ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C Occupation SR DIR	TECHNOLOGY	Date of Receipt  0 3
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR SCOTT HELMUS	Aggregate	e Year-to-Date ▼ 210.00	Date of Descript
Mailing Address 23 VALLEY RD	Ctata	7ia Cada	Date of Receipt  0 3 1 3 2 0 1 0
City SUCCASUNNA	State NJ	Zip Code 07876	Transaction ID: INC.A.77642  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07070	85.00
Name of Employer MEDCO HEALTH SOLUTIONS		NT SOLUTIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 595.00	
Full Name (Last, First, Middle Initial) MR ERIC HESS	<b>'</b>		Date of Receipt
Mailing Address 10 CARLTON RD			03 13 2010
City FLANDERS	State NJ	Zip Code 07836	Transaction ID: INC.A.77735  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		60.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENG	n INEERING & OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	
SUBTOTAL of Receipts This Page (optional)			175.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 42 / 201   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON			Date of Receipt
Mailing Address 16 LUTH TERRACE	Ī		03 13 2010
City	State	Zip Code	Transaction ID: INC.A.77858
WEST ORANGE FEC ID number of contributing federal political committee.	NJ C	07052	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHA	n ARMACY OPS	
Receipt For:  Primary  General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN			Date of Receipt
Mailing Address 974 HILLCREST RO	DAD		03 / 13 / Y Y Y Y
City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.77939
FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FACI		
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR ROGER HOLLAND			Date of Receipt
Mailing Address 41 SAINT RAPHAE	L		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LAGUNA NIGUEL	State CA	Zip Code 92677	Transaction ID: INC.A.77849
FEC ID number of contributing federal political committee.	C	32011	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 201 (check only one)    X   11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ELIZABETH HOLLOWAY  Mailing Address 9222 RANDLE VALL  City CORDOVA  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	EY DR  State Zip Code TN 38018  C  Occupation ASSISTANT GENERAL COUNSEL  Aggregate Year-to-Date  280.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 5 SUNCLIFF DR  City TARRYTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10591  C  Occupation VP INTERVENTION DELIVERY SYS  Aggregate Year-to-Date   560.00	Date of Receipt  M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) RITA HOLT Mailing Address 1558 N PISGAH ROA  City CORDOVA  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code TN 38016  C  Occupation VP REIMBURSEMENT  Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		170.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 201 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and addre	ess of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS CYNTHIA HORN Mailing Address 9553 ANDREW DR  City TWINSBURG FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State OH  C  Occupation VP CUST S  Aggregate Y	Zip Code 44087 SVC ear-to-Date ▼	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Other (specify) ▼  Full Name (Last, First, Middle Initial) MR STEVEN HOROWITZ  Mailing Address 4 MELISSA COURT		350.00	Date of Receipt  0 3
City  MONTVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C Occupation	Zip Code 07045	Transaction ID: INC.A.78094  Amount of Each Receipt this Period  50.00
Receipt For: Primary General Other (specify)		ESS PLANNING ear-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR BERNARD HUKILL Mailing Address 17219 CLOVIS City	State	Zip Code	Date of Receipt    M
HELOTES  FEC ID number of contributing federal political committee.	TX	78023	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHAR		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional)			150.00

SCHEDULE A (FEC F ITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 45 / 201   (check only one)
Any information copied from such or for commercial purposes, other	Reports and Statements may than using the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (IN F	,	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle MR JEFFREY HULL	Initial)		Date of Receipt
Mailing Address 2616 S 3E	3'S & K RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State OH	Zip Code	Transaction ID: INC.A.77863
GALENA FEC ID number of contributing federal political committee.		43021	Amount of Each Receipt this Period  32.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation SR DIR I	n HLTH CARE OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼  224.00	
Full Name (Last, First, Middle MRS KIMBERLY HUMPHRIES	Initial)		Date of Receipt
Mailing Address 10010 PC	INTE COVE		M M / D D / Y Y Y Y Y O D D / 2 0 1 0
City LAKELAND	State TN	Zip Code	Transaction ID: INC.A.78194
FEC ID number of contributing federal political committee.		38002	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUF	Occupation VP BUSI	n NESS PLANNING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle MR DAVID ISRAEL	Initial)		Date of Receipt
-	JMBUS AVENUE		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NEW YORK	State NY	Zip Code 10025	Transaction ID: INC.A.77568
FEC ID number of contributing federal political committee.		10025	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation VP BUSI	n NESS DEV	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Pa	ge (optional)		132.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 201 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS SUSAN ITO Mailing Address 6366 SW 90TH STRI  City GAINESVILLE  FEC ID number of contributing federal political committee.	State FL	Zip Code 32608	Date of Receipt  M M M D D D Z 2010  Transaction ID: INC.A.77579  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		n R CLINICAL SVCS  Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial) MS MARIANNE JACKS Mailing Address 329 MORRIS AVENU	JE		Date of Receipt  0 3 1 3 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.77618
MOUNTAIN LAKES  FEC ID number of contributing federal political committee.	NJ C	07046	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS		ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR JASON JAMES	<b>I</b>		Date of Receipt
Mailing Address RR 2 BOX 2036			03 13 2010
City CANADENSIS	State PA	Zip Code 18325	Transaction ID: INC.A.77572  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1	35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHY	n SICIAN ENGAGEMENT	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 245.00	
SUBTOTAL of Receipts This Page (optional)			135.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 201 (check only one)    X
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
ب 4.	Full Name (Last, First, Middle Initial) MR TODD JEFFREY			Date of Receipt
	Mailing Address 15 ELIZABETH STRI	EEI		03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.77997
	DUMONT	NJ	07628	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PHAI	n RM CONTRACT & CONSUL	TING
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	]
_ 3.	Full Name (Last, First, Middle Initial) ROBERT JINKS			Date of Receipt
	Mailing Address 22 PAGE AVE			03 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.77632
	LYNDHURST	NJ	07071	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		NESS REQUIREMENTS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		350.00	
. –	Full Name (Last, First, Middle Initial) MRS REGINA JONES	<b>'</b>		Date of Receipt
	Mailing Address POST OFFICE BOX	38342		03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.77734
	GERMANTOWN	TN	38183	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP CUS	TSVC	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 525.00	1
	Other (specify) ▼	0 0	020.00	1
Г				175.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(Crieck Orlly Orle)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and address of any political commit	
Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12224 MONTCALM S  City CARMEL FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code IN 46032  C  Occupation VP/GM  Aggregate Year-to-Date  325.00	Date of Receipt  M M / D D D / Y Y Y Y Y  O 3 13 2010  Transaction ID: INC.A.77941  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD Mailing Address 16357 VICTORIA CUI  City PRIOR LAKE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code MN 55372  C  Occupation SR DIR CLIENT & MKT PROG S Aggregate Year-to-Date	
Full Name (Last, First, Middle Initial) MR JOHN KAPIOSKI Mailing Address 8202 MARSH GLEN ( City TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code FL 33647  C  Occupation SR DIR PHARMACY COMPLIAN Aggregate Year-to-Date  350.00	
SUBTOTAL of Receipts This Page (optional) .		110.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	lress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE Mailing Address 995 PINES TERR  City FRANKLIN LAKES FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		Zip Code 07417 n ANCIAL & ANALYTICAL SV Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify)  Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III	riggregate	350.00	Date of Receipt
Mailing Address 1970 WOODLANDS  City POWELL  FEC ID number of contributing	State OH	Zip Code 43065	Transaction ID: INC.A.77854  Amount of Each Receipt this Period
Receipt For:  Primary  Other (specify) ▼		n L MGR GROUP Year-to-Date ▼ 350.00	50.00
Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER Mailing Address 121 CONKLING TOV	WN ROAD		Date of Receipt  0 3 1 3 2 0 1 0
City CHESTER  FEC ID number of contributing federal political committee.	State NY	Zip Code 10918	Transaction ID: INC.A.77984  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>-                                     </del>	ACCT MGMT  Year-to-Date ▼  350.00	
SUBTOTAL of Receipts This Page (optional)			150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee C. POLITICAL ACTION COMMITTEE (a.	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	S. I OLITIOAL ACTION COMMITTEL (a.	, 
Mailing Address 295 GLEN PLACE		Date of Receipt  0 3 1 3 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.78032
FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES & CHIEF OPERATING OFF	FICER
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1346.10	
Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI		Date of Receipt
Mailing Address 920 CLARK STREE	Т	03 13 2010
City	State Zip Code	Transaction ID: INC.A.77648
BOWLING GREEN FEC ID number of contributing federal political committee.	OH 43402	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS BARBARA KRZAK		Date of Receipt
Mailing Address 495 ISLAND WAY		0 3 1 3 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.77894
FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  385.00	· .
SUBTOTAL of Receipts This Page (optional	l)	297.30

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 51 / 201   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MR MICHAEL KRZAN			Date of Receipt
Mailing Address 2735 YORK RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COLUMBUS	State OH	Zip Code 43221	Transaction ID: INC.A.77956
FEC ID number of contributing federal political committee.	С	43221	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP MEI	n MBER SVCS	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR MANOJ KUMAR			Date of Receipt
Mailing Address 7 SUNRISE WAY			03 / 13 / Y Y Y Y Y
City TOWACO	State NJ	Zip Code 07082	Transaction ID: INC.A.77882  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07002	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINES	n SS PROCESS CHAMPION	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial)  MR MARK LANDY			Date of Receipt
Mailing Address 18 LADIK PL			0 3 1 3 2 0 1 0
City MONTVALE	State NJ	Zip Code 07645	Transaction ID: INC.A.77889
FEC ID number of contributing federal political committee.	C	0/045	Amount of Each Receipt this Period  75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SVC	n DELIVERY SYSTEM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	
SUBTOTAL of Receipts This Page (optional	ـــــــــــــــــــــــــــــــــــــ	<b>)</b>	155.00
TOTAL This Period (last page this line num	ber only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	) 	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 52 / 201   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) JAMES LANGLEY			Date of Receipt
Mailing Address 10921 MAIN RAN	GE TRAIL		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LITTLETON	State CO	Zip Code 80127	Transaction ID: INC.A.78187  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIM	n IBURSEMENT	
Receipt For:  Primary General  Other (specify)		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER			Date of Receipt
Mailing Address 1100 KIMBERLY	COURT		03 13 2010
City ROSEVILLE	State CA	Zip Code 95661	Transaction ID: INC.A.77841
FEC ID number of contributing federal political committee.	C	95001	Amount of Each Receipt this Period  100.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	OOVERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) JOSEPH LENZ			Date of Receipt
Mailing Address 1735 LINKENHOL	T COVE		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COLLIERVILLE	State TN	Zip Code 38017	Transaction ID: INC.A.78071  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30017	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP PERF	ORMANCE STRATEGY	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	nal)		200.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 53 / 201   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DORIAN LO			Date of Receipt
Mailing Address 6 CLUBHOUSE RO	DAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BLOOMINGDALE	State NJ	Zip Code 07403	Transaction ID: INC.A.77845
FEC ID number of contributing federal political committee.	C	07403	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIN	n ICAL SVCS	
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR ROBERT LONG			Date of Receipt
Mailing Address 18 HARLIND TERF	RACE		0 3 1 3 2 0 1 0
City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.77830
FEC ID number of contributing federal political committee.	C	07440	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) DAVID LOSCHINSKEY			Date of Receipt
Mailing Address 4500 MT GILLESP	IE DR		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LAKELAND	State TN	Zip Code 38002	Transaction ID: INC.A.78191
FEC ID number of contributing federal political committee.	C	30002	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP BIAC	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (options			150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 201 (check only one)    X   11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
2	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR ROSS LUCE Mailing Address 1066 WEST GROVE	CT		Date of Receipt
	Walling Address 1000 WEST GROVE	<b>U</b> 1		03 13 2010
	CIRCONIA	State	Zip Code	Transaction ID: INC.A.77700
	GIBSONIA  FEC ID number of contributing federal political committee.	PA C	15044	Amount of Each Receipt this Period  30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:	++	e Year-to-Date ▼	
	Primary General Other (specify) ▼	39.53	390.00	
– В.	Full Name (Last, First, Middle Initial) MR KENNETH MALLEY			Date of Receipt
	Mailing Address 764 W. SADDLE RIVI	03 13 Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC.A.77736
	HO HO KUS	NJ	07423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	_	SENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
c. –	Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO			Date of Receipt
	Mailing Address 33 HICKORY TAVER	N RD		03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.77581
	GILLETTE	NJ	07933	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			130.00
t	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)	OLITICAL /	ACTION COMMITTEE (a.k.a	Date of Receipt
۹.	LORI MARINO  Mailing Address 31 UNDERWOOD DRI	VE		0 3 1 3 2 0 1 0
	City WEST ORANGE	State NJ	Zip Code 07052	Transaction ID: INC.A.78115  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07032	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST GI	n ENERAL COUNSEL	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
3.	Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL Mailing Address W144 N7150 TERRAC			Date of Receipt
		03 / 13 / 2010		
	City MENOMONEE FALLS	State WI	Zip Code 53051	Transaction ID: INC.A.77767  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33031	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
_ ;.	Full Name (Last, First, Middle Initial) MR TODD MARTIN			Date of Receipt
-	Mailing Address 11825 SHEPPARDS C	ROSSING		M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: INC.A.77716
	CLARKSVILLE FEC ID number of contributing federal political committee.	C	21029	Amount of Each Receipt this Period 192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n BENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10	
	SUBTOTAL of Receipts This Page (optional)			292.30
Ī	TOTAL This Period (last page this line number	only)		

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 201 (check only one)    X
or for con	nmercial purposes, other than using the OF COMMITTEE (In Full)	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full N	CO HEALTH SOLUTIONS INC.  ame (Last, First, Middle Initial)	POLITICAL /	ACTION COMMITTEE (a.k.a	<u>,                                      </u>
	ILLIAM MARTIN g Address 2601 FOX HLL CIRC	LE EAST		Date of Receipt    M   M   D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City GER	MANTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.78123  Amount of Each Receipt this Period
	D number of contributing I political committee.	C		50.00
	of Employer REDO HEALTH GROUP	<del>- '</del>	VP BUS DEV	
	ot For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
MR JE	ame (Last, First, Middle Initial) FFREY MAY g Address 137 WASHINGTON A	AVE		Date of Receipt
City		State	Zip Code	03 13 2010
•	SDALE	NJ	07642	Transaction ID: INC.A.77943  Amount of Each Receipt this Period
	D number of contributing I political committee.	C		192.30
	of Employer CO HEALTH SOLUTIONS	Occupatio SVP DRI	n JG DISTRIB & CONTROL	
	ot For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10	
MR SH	ame (Last, First, Middle Initial) HAMUS MC GUIRE  2 Address 57 MOUNTAINSIDE	DRIVE		Date of Receipt
City			Zin Codo	03 13 2010
City <u>POM</u>	PTON LAKES	State NJ	Zip Code 07442	Transaction ID: INC.A.77746  Amount of Each Receipt this Period
	D number of contributing I political committee.	C		50.00
	of Employer REDO HEALTH GROUP	<del>-                                    </del>	S AND MARKETING	
	ot For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	<b>FAL</b> of Receipts This Page (optional)	•		292.30

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 201 (check only one)    X
or	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	e name and add	lress of any political committee to	o solicit contributions from such committee.
۱.	Full Name (Last, First, Middle Initial) THOMAS MCCANN Mailing Address 9600 DOVE SPRING	CV		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.78199  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP SALE		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH Mailing Address 87 ROSELAWN RD	1		Date of Receipt  0 3 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.77840
	HIGHLAND MILLS FEC ID number of contributing federal political committee.	C	10930	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST GE	NERAL COUNSEL	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1344.00	
	Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA			Date of Receipt
	Mailing Address 112 GREEN TERRAC	EWAY		03 13 2010
	City WEST MILFORD	State NJ	Zip Code 07480	Transaction ID: INC.A.77991  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUS	SINESS OPS	
	Receipt For:  Primary General  Other (specify) ▼	<del>, '</del>	Year-to-Date ▼ 1346.17	
SI	JBTOTAL of Receipts This Page (optional)	1		434.31

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or 1	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) DAVID MILLER  Mailing Address 7 CLOVER LANE  City RANDOLPH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		DR RELATIONS  • Year-to-Date ▼  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) MRS KAREN MILLER  Mailing Address 34 MACKENZIE LANE  City DENVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State NJ  C  Occupation EXEC DI	Zip Code 07834  n IR INTERNAL AUDIT	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.77580  Amount of Each Receipt this Period  50.00
 C.	Primary General Other (specify)  Full Name (Last, First, Middle Initial) PAMELA MILLER Mailing Address 158 SUMMIT AVENUE City HACKENSACK FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C	Zip Code 07601	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For:  Primary General  Other (specify) ▼  JBTOTAL of Receipts This Page (optional)	Aggregate	TAIN & COMMUNITY INVES  • Year-to-Date ▼  385.00	155.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR DAVID MITCHELL			Date of Receipt
	Mailing Address 222 WEST 14TH STR APT. 4B			03 / 13 / 2010
	City NEW YORK	State NY	Zip Code 10011	Transaction ID: INC.A.78069  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKT	n ING & PRODUCT DEV	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- В.	Full Name (Last, First, Middle Initial) MS JULIANA MOLEK Mailing Address 8620 LAKE RILEY DR	IVE		Date of Receipt
				03 13 2010
	City CHANHASSEN	State MN	Zip Code 55317	Transaction ID: INC.A.77724  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n SPECIAL MARKETS	
	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date ▼ 350.00	
_ С.	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY			Date of Receipt
	Mailing Address 86 WELLINGTON AVE	ENUE		03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City SHORT HILLS	State NJ	Zip Code 07078	Transaction ID: INC.A.77569  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENL C	n -SEC-SVP PHARM STRAT S	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1344.00	
	SUBTOTAL of Receipts This Page (optional)	1	<b>.</b>	292.00
T	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate for each categ Detailed Sumi	gory of the
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	g the name and address of any politic	sed by any person for the purpose of soliciting contributions ical committee to solicit contributions from such committee.  MITTEE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MS THERESA MORMILE  Mailing Address 59 VALLEY VIEW	TER	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MONTVALE FEC ID number of contributing	State Zip Code NJ 07645	Transaction ID: INC.A.77944  Amount of Each Receipt this Period  50.00
Receipt For:  Primary  Other (specify)   General	Occupation VP FINANCE  Aggregate Year-to-Date	
Full Name (Last, First, Middle Initial) MR CRAIG MORRIS Mailing Address N 49 W 25648 MC	KERROW DR	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PEWAUKEE  FEC ID number of contributing federal political committee.	State Zip Code WI 53072	Transaction ID: INC.A.77766  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation EXEC DIR CLINICAL S Aggregate Year-to-Date	
Full Name (Last, First, Middle Initial) MR ROBERT MULLER Mailing Address 69 FERN PLACE		Date of Receipt
City PARAMUS  FEC ID number of contributing federal political committee.	State Zip Code NJ 07652	Transaction ID: INC.A.77960  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP HLTH BUS CLIENT Aggregate Year-to-Date	
SUBTOTAL of Receipts This Page (option	al)	150.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 201 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS BECKY NAGLE  Mailing Address 64 WALTER AVE  City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
HASBROUCK HEIGHTS FEC ID number of contributing federal political committee.	NJ 07604	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP CLINICAL SVCS Aggregate Year-to-Date  350.00	
Full Name (Last, First, Middle Initial) JANARDHAN NARAYANAN Mailing Address 32 BLACKSTONE	E DRIVE	Date of Receipt  0 3 1 3 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.78127
PRINCETON  FEC ID number of contributing federal political committee.	NJ 08540	Amount of Each Receipt this Period  29.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR MARKET STRATEGY	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.00	]
Full Name (Last, First, Middle Initial) MR MICHAEL NICODEMO Mailing Address 407 MEER AVE		Date of Receipt
		03 13 2010
City WYCKOFF	State Zip Code NJ 07481	Transaction ID: INC.A.77990  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	]
SUBTOTAL of Receipts This Page (optio	nal)	129.00
TOTAL This Period (last page this line nu	mber only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 201 (check only one)    X   11a
(	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS ARLENE NOLAN	_		Date of Receipt
	Mailing Address 319 BOGERT AVENU			03 / 13 / 2010
	City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.77687  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07400	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
– В.	Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN Mailing Address 45 DAVIS ROAD	1		Date of Receipt
	Ivialility Address 45 DAVIS ROAD			03 13 2010
	City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.77770
	FEC ID number of contributing federal political committee.	C	07071	Amount of Each Receipt this Period  38.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLII	on NICAL THERAPEUTICS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 266.00	]
c.	Full Name (Last, First, Middle Initial) DENISE O'CALLAGHAN			Date of Receipt
	Mailing Address 4 HIGHLAND AVE P.O. BOX 408			03 / 13 / 2010
	City PEAPACK	State NJ	Zip Code 07977	Transaction ID: INC.A.78120  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			138.00
T	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sche for each category o Detailed Summary	of the
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.  EE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER Mailing Address 6 PARK DR SOUTH  City RYE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State Zip Code NY 10580  C  Occupation GROUP COO  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 1 3 2 0 1 0  Transaction ID: INC.A.77974  Amount of Each Receipt this Period  50.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR MELVIN OHL  Mailing Address 274 E FRANKLIN TPK		Date of Receipt
City  RIDGEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07450  C  Occupation VP PROCUREMENT & INV Aggregate Year-to-Date	Transaction ID: INC.A.77915  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MRS SUE OLIVER Mailing Address 11 LEE DRIVE  City NORTH HALEDON  FEC ID number of contributing federal political committee.	State Zip Code NJ 07508  C	Date of Receipt  M M / D D / Y Y Y Y Y  0 3 1 3 2 0 1 0  Transaction ID: INC.A.77925  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	EXEC DIR TECHNOLOGY  Aggregate Year-to-Date ▼	00.00
SUBTOTAL of Receipts This Page (optional)		150.00

	LE A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 201 (check only one)    X
or for commerc	n copied from such Reports and Sial purposes, other than using the COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
		POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A. MS LUDIVIN	Last, First, Middle Initial) A PACAMARRA			Date of Receipt
Mailing Add	ress 4 TEAK COURT			03 / 03 / 2010
City RINGWO	OD	State NJ	Zip Code 07456	Transaction ID: INC.A.77902  Amount of Each Receipt this Period
FEC ID nun	nber of contributing cal committee.	C		50.00
Name of En MEDCO HE	nployer EALTH SOLUTIONS	Occupatio EXEC DI	n R TECHNOLOGY	
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 350.00	
Full Name (	Last, First, Middle Initial)			Date of Receipt
	ress 185 PASCACK ROAD			03 / 13 / Y Y Y Y Y
City <u>PARK RIE</u>	OGE	State NJ	Zip Code 07656	Transaction ID: INC.A.77901  Amount of Each Receipt this Period
FEC ID nun	nber of contributing cal committee.	C		50.00
Name of En MEDCO HE	nployer EALTH SOLUTIONS	Occupatio GROUP		
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 300.00	
Full Name (	Last, First, Middle Initial) LE PAIGE			Date of Receipt
Mailing Add	ress 12 MILLBROOK COU	RT		03 13 2010
City LIVINGST	ON	State NJ	Zip Code 07039	Transaction ID: INC.A.77792
FEC ID nun	nber of contributing cal committee.	C	07039	Amount of Each Receipt this Period  50.00
Name of En MEDCO HE	nployer EALTH SOLUTIONS	Occupatio VP RETI	n REE SOLUTIONS MKTG	
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL o	f Receipts This Page (optional)			150.00
TOTAL This F	Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and sort for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR MATTHEW PATELLA Mailing Address 30 TAM O SHANTER	DDIVE		Date of Receipt
		DUILE		03 / 13 / 2010
	City	State	Zip Code	Transaction ID: INC.A.77626
	MAHWAH FEC ID number of contributing	NJ	07430	Amount of Each Receipt this Period  50.00
	federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	n L ACCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date <b>V</b>	
	Primary General Other (specify) ▼	0 0	350.00	
— В.	Full Name (Last, First, Middle Initial) MRS CATHY PATTEN			Date of Receipt
	Mailing Address 2001 MEADOWS AV	ENUE		03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.77857
	LANTANA	TX	76226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00	
_ С.	Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS			Date of Receipt
	Mailing Address 2780 FOLKSTONE R	OAD		0 3 1 3 2 0 1 0
	City COLUMBUS	State OH	Zip Code 43220	Transaction ID: INC.A.77659
	FEC ID number of contributing federal political committee.	C	45220	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
Γ,	SUBTOTAL of Receipts This Page (optional) .			100.00
	TOTAL This Period (last page this line number		<u> </u>	

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)   NEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k. a. Medco Health PAC)	SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial) Mailing Address 211 WILTSIE COURT  City State Zip Code WYCKOFF NJ 07481  FEC ID number of contributing federal political committee.  Name of Employer General Other (specify) ▼  State Zip Code WYCKOFF NJ 07481  FEC ID number of contributing federal political committee.  Name of Employer General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Date of Receipt NJ 13	or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Mailing Address 211 WILTSIE COURT	1 1	C. POLITICAL ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
City State Zip Code NJ 07481  FEC ID number of contributing federal political committee.  Name of Employer MEDOO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  State Zip Code YP INFO TECHNOLOGY  Aggregate Year-to-Date ▼  10	MR ROBERT PELLEGRINI	DT	<b>⊣</b>
## WYCKOFF   NJ 07481			03 13 2010
FEC ID number of contributing federal political committee.    Name of Employer   Primary   General   Primary   General   Primary   General   Primary   Primary   General   Primary   Prim	-		
Receipt For:     Primary	FEC ID number of contributing	C	
Primary General Other (specify) ▼ 210.00  Full Name (Last, First, Middle Initial)  Mailing Address 3201 QUEENSBURY WAY WEST  City State Zip Code  COLLEYVILLE TX 76034  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼ 350.00  Full Name (Last, First, Middle Initial)  Mailing Address 9304 GROVE PARK COVE  City State Zip Code  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: INC.A.78139  Amount of Each Receipt this Period  50.00  Date of Receipt  Transaction ID: INC.A.78139  Amount of Each Receipt His Period  Transaction ID: INC.A.78143  Amount of Each Receipt  Date of Receipt  Transaction ID: INC.A.78143  Amount of Each Receipt His Period  FEC ID number of contributing federal political committee.  Name of Employer ACREBO HEALTH GROUP  Name of Employer ACREBO HEALTH GROUP  Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	Name of Employer MEDCO HEALTH SOLUTIONS	· ·	
Mailing Address 3201 QUEENSBURY WAY WEST  City State Zip Code TX 76034  FEC ID number of contributing federal political committee.  Primary General Other (specify) ▼ State Zip Code Transaction ID: INC. A. 78139  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A. 78139  Amount of Each Receipt this Period  FEC ID number of Contributing federal political committee.  Primary General Other (specify) ▼ State Zip Code Transaction ID: INC. A. 78143  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A. 78143  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A. 78143  Amount of Each Receipt this Period  Transaction ID: INC. A. 78143  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼ Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  120.00	Primary General	210.00	
City State Zip Code COLLEYVILLE TX 76034  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  State Zip Code TX 76034  Amount of Each Receipt this Period  PAGGREGATE VERY State Zip Code TRANSACTICE LEADER  Pate of Receipt  Date of Receipt  Transaction ID: INC.A.78139  Amount of Each Receipt this Period  Page of Each Receipt Solution VP NATIONAL PRACTICE LEADER  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: INC.A.78143  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Transaction ID: INC.A.78143  Amount of Each Receipt this Period  Transaction ID: INC.A.78143  Transaction ID:	MERRI PENDERGRASS, MD		Date of Receipt
COLLEYVILLE  TX 76034  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	Mailing Address 3201 QUEENSBUR	Y WAY WEST	
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR VICTOR PERINI  Mailing Address 9304 GROVE PARK COVE  City State Zip Code TNN 38139  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Occupation VP TRC  Receipt For:  Primary General Occupation VP TRC  Aggregate Year-to-Date ▼  120.00	City	State Zip Code	Transaction ID: INC.A.78139
Name of Employer   MEDCO HEALTH SOLUTIONS   Occupation   VP NATIONAL PRACTICE LEADER	COLLEYVILLE	TX 76034	Amount of Each Receipt this Period
Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) MR VICTOR PERINI Mailing Address 9304 GROVE PARK COVE  City State Zip Code GERMANTOWN TN 38139  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  120.00		C	50.00
Primary General Other (specify) ▼    State   Zip Code	Name of Employer MEDCO HEALTH SOLUTIONS	· '	
Mailing Address 9304 GROVE PARK COVE  City State Zip Code GERMANTOWN TN 38139  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify) ▼  Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Primary General		
City  GERMANTOWN  TN  38139  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary  General  Other (specify) ▼  Aggregate Year-to-Date  120.00			Date of Receipt
GERMANTOWN  TN 38139  Amount of Each Receipt this Period  C  Solution  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary  Other (specify) ▼  Amount of Each Receipt this Period  50.00  Aggregate Year-to-Date  350.00	Mailing Address 9304 GROVE PAR	< COVE	
FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)   Aggregate Year-to-Date	•	·	Transaction ID: INC.A.78143
federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary Other (specify) ▼  Aggregate Year-to-Date  350.00		TN 38139	Amount of Each Receipt this Period
ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  350.00	federal political committee.		50.00
Primary General Other (specify) ▼ 350.00		VP TRC	
Other (specify) ▼ 350.00		Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		350.00	
992101712 of 11000pts 111101 age (optional)	SUBTOTAL of Receipts This Page (optional	) )	130.00
TOTAL This Period (last page this line number only)		· · · · · · · · · · · · · · · · · · ·	

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
or for con	mation copied from such Reports and S nmercial purposes, other than using the E OF COMMITTEE (In Full) CO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.  . Medco Health PAC)
. JIMMY Mailin City COL	ame (Last, First, Middle Initial) Y PERREN g Address 1250 BRAY PARK DR  LIERVILLE D number of contributing all political committee.	EAST State TN	Zip Code 38017	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Recei	of Employer REDO HEALTH GROUP  pt For:  Primary General  Other (specify)		n ULATORY COMPLIANCE 9 Year-to-Date ▼ 525.00	
MR TI	ame (Last, First, Middle Initial) HOMAS PETTYES g Address 8522 UPLAND LN NOI	RTH		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: INC.A.77710
<u>MAP</u>	LE GROVE	MN	55311	Amount of Each Receipt this Period
federa	D number of contributing al political committee.	C		50.00
Name MED(	of Employer CO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	pt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00	
	ame (Last, First, Middle Initial) HOMAS PIERCE	•		Date of Receipt
	g Address 10297 E. LAKE DR.			0 3 1 3 2 0 1 0
City	LEWOOD	State	Zip Code	Transaction ID: INC.A.78097
FEC I	LEWOOD  D number of contributing all political committee.	CO	80111	Amount of Each Receipt this Period  50.00
Name MED(	of Employer CO HEALTH SOLUTIONS	Occupatio VP LABO	n DR RELATIONS	
	pt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 350.00	
CURTO	TAL of Receipts This Page (optional)			175.00

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 201 (check only one)    X   11a
or for commerci	copied from such Reports and St al purposes, other than using the COMMITTEE (In Full) IEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.  a. Medco Health PAC)
MS JUDITHI  Mailing Addr  City  MORRIST  FEC ID num federal politic  Name of Em MEDCO HE  Receipt For:  Primar	OWN  Siber of contributing cal committee.  Sployer ALTH SOLUTIONS		Zip Code 07960 on SENERAL MGR e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 13 2010  Transaction ID: INC.A.77583  Amount of Each Receipt this Period  192.30
MR NEIL PR Mailing Addr  City POWELL  FEC ID num federal politic  Name of Em MEDCO HE  Receipt For: Primar	uber of contributing cal committee.	State OH C Occupatio VP HLTH	Zip Code 43065  In H CARE OPS/FORMULARY/ 2 Year-to-Date ▼ 350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.77866  Amount of Each Receipt this Period  50.00
MS KARIN P Mailing Addr City RAMSEY FEC ID num federal politic Name of Em MEDCO HE Receipt For:	aber of contributing cal committee.	State NJ  C  Occupatio SVP HR  Aggregate	Zip Code 07446 on e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.77815  Amount of Each Receipt this Period  192.30
SUBTOTAL of	Receipts This Page (optional)			434.60

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 201 (check only one)    X
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	o solicit contributions from such committee.
. ∠ A.	Full Name (Last, First, Middle Initial) MR JASON PROULX Mailing Address 3601 LEANNE DRIVE  City FLOWER MOUND	State TX	Zip Code 75022	Date of Receipt    M M M
	FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)		PLANNING Year-to-Date   350.00	50.00
_ 3.	Full Name (Last, First, Middle Initial) MR MARK PROULX Mailing Address 20 BRANDY RIDGE Receity SPARTA FEC ID number of contributing	State NJ	Zip Code 07871	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	. '	F OPERATIONS  Year-to-Date   1346.17	192.31
<u>-</u>	Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL  City KELLER FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State TX C	Zip Code 76248	Date of Receipt    M M
_	Receipt For: Primary General Other (specify)	DIR HR Aggregate	Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)			267.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sch for each category Detailed Summary	of the
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used e name and address of any political of	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMIT	TEE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS FRANCES RAO		Date of Receipt
Mailing Address 19 ROSS ROAD  City	State Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SCARSDALE	NY 10583	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR REGULATORY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	25.00
Full Name (Last, First, Middle Initial) MRS MONICA REED	1	Date of Receipt
Mailing Address 8475 DUNHAM STAT		03 / 13 / 2010
City	State Zip Code	Transaction ID: INC.A.77809
TAMPA	FL 33647	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROF PRA	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3	350.00
Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS		Date of Receipt
Mailing Address 204 TOKENEKE RD		03 / 13 / Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.77729
DARIEN	CT 06820	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BIAC	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	50.00
		175.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>()</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 201 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR VICTOR RENNA  Mailing Address 8 CARLA ANN CT			Date of Receipt
City FLANDERS	State NJ	Zip Code 07836	Transaction ID: INC.A.77978  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	C	n	50.00
MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	VP PRO	CUREMENT & INVENTORY  e Year-to-Date   350.00	
Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS Mailing Address 412 RIVER MEWS	LANE		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.78037
EDGEWATER	NJ	07020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		70.00
Name of Employer MEDCO HEALTH SOLUTIONS	<del></del>	R TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 490.00	
Full Name (Last, First, Middle Initial) ELIZABETH RITCHIE	•		Date of Receipt
Mailing Address 27 DAY RD			03 / 13 / 2010
City PLEASANT VALLEY	State CT	Zip Code 06063	Transaction ID: INC.A.78101
FEC ID number of contributing federal political committee.	C	0000	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	l)		170.00

ITEMIZED RECEIPTS	3A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 72 / 201   (check only one)
Any information copied from such Reports or for commercial purposes, other than us	and Statements may ing the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	INC. POLITICAL A	CTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO			Date of Receipt
Mailing Address 855 CLUB MOSS	S CT.		0 3 1 3 2 0 1 0
City MARIETTA	State GA	Zip Code 30068	Transaction ID: INC.A.77727  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRESIDE	NT SYSTEMED	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.10	
Full Name (Last, First, Middle Initial) MS DONNA ROSEN			Date of Receipt
Mailing Address 7 RED OAK LAN	IE		0 3 1 3 2 0 1 0
City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.77933  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07-100	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS-	CLINICAL TECH	
Receipt For:  Primary General  Other (specify) ▼	- t	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS			Date of Receipt
Mailing Address 7227 RAMOTH [	DRIVE		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City JACKSONVILLE	State FL	Zip Code 32226	Transaction ID: INC.A.77690  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	J2220	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIF	R FORMULARY CONSULT	 ING
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optic			292.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 201 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR RICHARD RUBINO Mailing Address 3 APACHE DRIVE			Date of Receipt  0 3 1 3 2 0 1 0
City OAKLAND FEC ID number of contributing	State NJ	Zip Code 07436	Transaction ID: INC.A.77929  Amount of Each Receipt this Period  193.00
Receipt For:  Primary  Other (specify)   General  Other (specify)   General	Occupation SVP FIN	n ANCE & CHIEF FIN OFFCR Year-to-Date ▼ 1351.00	
Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK Mailing Address 21 SKY TOP RIDG	GE		Date of Receipt  0 3 1 3 2 0 1 0
City OAKLAND FEC ID number of contributing	State NJ	Zip Code 07436	Transaction ID: INC.A.77752  Amount of Each Receipt this Period
rederal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary  General  Other (specify) ▼		n ICAL MGMT & SVCS e Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial)  MS KATHERYN RUSSI  Mailing Address 5965 VILLAGE CIF	RCLE		Date of Receipt
City JOHNSTON	State IA	Zip Code 50131	Transaction ID: INC.A.77634  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	<del>- ' '</del>	R CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	al)		293.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)	s and Statements may not be sold or used by any personing the name and address of any political committee to INC. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ANTHONY RUSSO Mailing Address 66 FINCH RD  City RINGWOOD FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07456  C  Occupation VP PROF PRA  Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.77874  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) JULIANA RUTH Mailing Address 1 UNDERCLIFF  City KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	TERRACE  State Zip Code NJ 07405  C  Occupation SR DIR BUSINESS DEVELOPMENT Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR JESSE RUZICKA Mailing Address 334 MORRIS AV  City BOONTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07005  C  Occupation NATL ACCT EXEC  Aggregate Year-to-Date  210.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.78059  Amount of Each Receipt this Period  30.00
SUBTOTAL of Receipts This Page (opti	onal)	130.00

	FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE /5/201   (check only one)
A	ny information copied from such Reports and St r for commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MS MARY RYAN			Date of Receipt
	Mailing Address 456 RICHMOND AVEN	UE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.77922
	MAPLEWOOD	NJ	07040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.34
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PHAR	n RMACY REGULATORY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 470.04	
-	Full Name (Last, First, Middle Initial) MR MATTHEW SARDY			Date of Receipt
	Mailing Address 230 FAIRFIELD AVE.			03 / 13 / Y Y Y Y Y Y Y
	City RIDGEWOOD	State NJ	Zip Code	Transaction ID: INC.A.77669
	FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
_	Full Name (Last, First, Middle Initial) MR DAVID SCHLETT			Date of Receipt
•	Mailing Address 339 GRAMERCY PL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.77928
	GLEN ROCK FEC ID number of contributing federal political committee.	NJ C	07452	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n ANCIAL & ANALYTICAL SV	
	Receipt For:	-	e Year-to-Date	
	Primary General Other (specify) ▼		350.00	
	SUBTOTAL of Receipts This Page (optional)			178.34

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 201 (check only one)    X
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ			Date of Receipt
	Mailing Address 9111 N KARLOV			03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.77660
	SKOKIE	IL	60076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
	Other (specify)		350.00	
	Full Name (Last, First, Middle Initial) BRUCE SCOTT			Date of Receipt
	Mailing Address 18650 BEARPATH TR	03 / 03 / 2010		
	City	State	Zip Code	Transaction ID: INC.A.78138
	EDEN PRAIRIE	MN	55347	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer ACCREDO HEALTH GROUP	Occupation PRESIDE		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1346.17	
_	Full Name (Last, First, Middle Initial) MS CYNTHIA SCOTT			Date of Receipt
	Mailing Address 18650 BEARPATH TF	RAIL		03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.77587
	EDEN PRAIRIE	MN	55437	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>, '</del>	ICAL PROG DEV	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		350.00	
Γ	SUBTOTAL of Receipts This Page (optional) .	1		292.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 201 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	lress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT Mailing Address 7330 EVEREST LA	ANE - NORTH		Date of Receipt
City  MAPLE GROVE  FEC ID number of contributing	State MN	Zip Code 55311	Transaction ID: INC.A.77980  Amount of Each Receipt this Period
name of Employer MEDCO HEALTH SOLUTIONS	<del></del>	ACCT EXEC	50.00
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE  Mailing Address 3021 E MILLCREE	K ROAD		Date of Receipt    M   M   D   D   V   Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State	Zip Code	Transaction ID: INC.A.77577
SALT LAKE CITY  FEC ID number of contributing federal political committee.	C	84109	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV	<b>1</b>		Date of Receipt
Mailing Address 66 PROSPECT AV	Æ		03 13 2010
City	State	Zip Code	Transaction ID: INC.A.78003
WESTWOOD  FEC ID number of contributing federal political committee.	C	07675	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (options	al)		150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pe the name and address of any political committee	
MEDCO HEALTH SOLUTIONS INC	C. POLITICAL ACTION COMMITTEE (a.I	k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CREI		Date of Receipt
City	State Zip Code	0 3 1 3 2 0 1 0  Transaction ID: INC.A.77838
LAS VEGAS	NV 89148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ONCOLOGY TRC OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	
Full Name (Last, First, Middle Initial) MR JOHN SHEA	AIRIVE	Date of Receipt
Mailing Address 62 FRANKLIN TUR	NPIKE	03 13 2010
City	State Zip Code	Transaction ID: INC.A.77599
ALLENDALE	NJ 07401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	280.00	
Full Name (Last, First, Middle Initial) MR FRANK SHEEHY		Date of Receipt
Mailing Address 119 HAMILTON RD		03 13 2010
City	State Zip Code	Transaction ID: INC.A.77679
RIDGEWOOD	NJ 07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1344.00	
OUDTOTAL (CD. 11) THE CO. (CT.	l)	292.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) DAWN SHERMAN			Date of Receipt
	Mailing Address 63 BRAMSHILL DRIV	03 / 03 / 2010		
	City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.78108  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP & CC	on OO INTL STRATEGY & OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- В.	Full Name (Last, First, Middle Initial) MR PETER SHERMAN			Date of Receipt
	Mailing Address 139 GATES AVENUE	03 / 03 / 2010		
	City MONTCLAIR	State <b>NJ</b>	Zip Code 07042	Transaction ID: INC.A.77570  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	01042	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MANAG	on ING COUNSEL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
_ С.	Full Name (Last, First, Middle Initial) JEFFREY SIMEK			Date of Receipt
	Mailing Address 3555 GRANDE TUSCANY WAY			03 13 2010
	City NEW SMYRNA BEACH	State FL	Zip Code 32168	Transaction ID: INC.A.77806  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	02.00	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP COR	n P COMMUNICATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1228.86	
	SUBTOTAL of Receipts This Page (optional) .	1		292.31
F	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 201 (check only one)    X
A C	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and add	ress of any political committee to	o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) MR LEE SIMON		(4.11.1	Date of Receipt
	Mailing Address 2390 GREENVIEW RC	DAD		03 / 13 / 2010
	City	State	Zip Code	Transaction ID: INC.A.77986
	NORTHBROOK  FEC ID number of contributing federal political committee.	C	60062	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:  Primary General  Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
3.	Full Name (Last, First, Middle Initial) MR JEFFREY SINKO Mailing Address 10 CHERRY TREE LA	NF		Date of Receipt
		03 13 2010		
	City	State	Zip Code	Transaction ID: INC.A.77850
	KINNELON FEC ID number of contributing federal political committee.	C	07405	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST GE	NERAL COUNSEL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
<u> </u>	Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO Mailing Address 564 DALE COURT EA	ST		Date of Receipt  0 3 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.77622
	RIVER VALE FEC ID number of contributing federal political committee.	NJ	07675	Amount of Each Receipt this Period 30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR T	ECHNOLOGY	
	Receipt For:  Primary  General  Other (specify)	. '	Year-to-Date ▼ 210.00	
	SUBTOTAL of Receipts This Page (optional)			130.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 201 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	he name and add	dress of any political committee to	o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC.	. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR BRADLEY SKATTER  Mailing Address 6433 FRANKLIN HIL	LC DD		Date of Receipt
City	State	Zip Code	0 3 1 3 2 0 1 0  Transaction ID: INC.A.77605
INDEPENDENCE	MN	55359	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	350.00	
Full Name (Last, First, Middle Initial) MR ROBERT SMITH	•		Date of Receipt
Mailing Address 40 JOSHUA DR T	-		03 / 03 / 2010
City	State	Zip Code	Transaction ID: INC.A.77954
RAMSEY	NJ	07446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR			Date of Receipt
Mailing Address 23 CEDAR GATE RO	OAD		03 / 13 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.78024
DARIEN FEO. ID acceptance of a contribution	СТ	06820	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHAIRM	n AN & CEO	
Receipt For:	Aggregate	e Year-to-Date ▼	_
Primary General Other (specify) ▼		1346.17	
SUBTOTAL of Receipts This Page (optional)			292.31

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 82 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ALAN SOKALER			Date of Receipt
	Mailing Address 30 MICHELLE WAY			03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.78060
	PINE BROOK FEC ID number of contributing	NJ	07058	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
- В.	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE			Date of Receipt
	Mailing Address 6108 HUNTER LANE			03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.77868
	COLLEYVILLE	TX	76034	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	325.00	
- С.	Full Name (Last, First, Middle Initial) PETER STARK			Date of Receipt
	Mailing Address 4840 COLE ROAD			03 13 2010
	City	State	Zip Code	Transaction ID: INC.A.78192
	MEMPHIS  FFG ID number of contribution	TN	38117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP		VP MANUF SVCS	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	,
	Other (specify)		350.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number		<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 201 (check only one)    X
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN Mailing Address 7 FOREST LAKE DR	OLITICAL	ACTION CONNITTIEE (a.n.a	Date of Receipt
	City WEST HARRISON	State NY	Zip Code 10604	Transaction ID: INC.A.77930  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	. '	n ANCIAL & ANALYTICAL SV e Year-to-Date ▼ 1346.17	c ]
	Full Name (Last, First, Middle Initial) MS JILL STEARNS  Mailing Address 13130 HALSELL DR			Date of Receipt  0 3 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.77989
	AUSTIN  FEC ID number of contributing federal political committee.	C	78732	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) MR CRAIG STEEL Mailing Address 122 DEMAREST AVEN	NUE		Date of Receipt  0 3 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.77717
	EMERSON FEC ID number of contributing federal political committee.	C	07630	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
$\begin{bmatrix} 1 \end{bmatrix}$	SUBTOTAL of Receipts This Page (optional)			292.31

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any or fo	information copied from such Reports and Sta or commercial purposes, other than using the r	atements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
<b>\</b> . <u>!</u>	ull Name (Last, First, Middle Initial) MS AMY STEINKELLNER			Date of Receipt
_	Mailing Address 728 GULF BOULEVARI C/O PO BOX 834			03 13 2010
	City NDIAN ROCKS BEACH	State FL	Zip Code 33785	Transaction ID: INC.A.77768  Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C		50.00
1	lame of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATION	n ONAL PRACTICE LEADER	
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	]
<b>3.</b> [	Full Name (Last, First, Middle Initial) DR GLEN STETTIN Mailing Address 8 MILL GLEN CT			Date of Receipt
_			7: 0 1	03 13 2010
	City JPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.78008  Amount of Each Receipt this Period
- F	EC ID number of contributing ederal political committee.	С		192.31
1	lame of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/GM	n ADVANCED CLINICAL SLT	
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
				Date of Receipt
_	Mailing Address 80 ALGONQUIN TRL			M M / D D / Y Y Y Y Y O D O D O D O D O D O D O D O
	City	State	Zip Code	Transaction ID: INC.A.77718
F	DAKLAND FEC ID number of contributing ederal political committee.	C	07436	Amount of Each Receipt this Period  50.00
<u>1</u>	lame of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n _ ACCT EXEC	
F	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 350.00	
SU	BTOTAL of Receipts This Page (optional)			292.31
то	TAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16			
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	r information copied from such Reports and Statements may not be sold or used by any person or commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N				
Full Name (Last, First, Middle Initial) MR SCOTT STRATTON Mailing Address 351 TIMBERLANE DF  City ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		Date of Receipt  M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS SUZANNE STREDNAK	350.00	Date of Receipt			
Mailing Address 157 WATCHUNG DR  City  HAWTHORNE  FEC ID number of contributing federal political committee.	State Zip Code NJ 07506	Transaction ID: INC.A.77665  Amount of Each Receipt this Period  50.00			
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR CLINICAL SVCS  Aggregate Year-to-Date ▼  350.00				
Full Name (Last, First, Middle Initial) MILAYNA SUBAR, MD Mailing Address 11 RIVERSIDE DRIVE #8CE City	State Zip Code	Date of Receipt    M			
NEW YORK  FEC ID number of contributing federal political committee.	NY 10023	Amount of Each Receipt this Period  30.00			
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP NATIONAL PRACTICE LEADER Aggregate Year-to-Date 210.00				
SUBTOTAL of Receipts This Page (optional) .		130.00			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMITTEE (a.k.a.	. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MR MARK SULLIVAN Mailing Address 40005 PINE VALE R		Date of Receipt		
Mailing Address 16025 PINE VALE P		03 / 13 / 2010		
City MIDLOTHIAN	State Zip Code VA 23113	Transaction ID: INC.A.77596  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C 25110	50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS PROCESS SPECIALIST			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial) MS IRENE SUTTON		Date of Receipt		
	Mailing Address 20 AVENUE @ PORT IMPERIAL APT 209			
City	State Zip Code	Transaction ID: INC.A.77683		
WEST NEW YORK	NJ 07093	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	40.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00			
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT		Date of Receipt		
Mailing Address 8362 GOLDEN PRAI	RIE DRIVE	03 13 2010		
City	State Zip Code	Transaction ID: INC.A.77726		
TAMPA  FEC ID number of contributing federal political committee.	FL 33647	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00			
SUBTOTAL of Receipts This Page (optional)		140.00		
TOTAL This Period (last page this line number				

ITEI Any i	HEDULE A (FEC Form 3X) MIZED RECEIPTS  Information copied from such Reports and Sta	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 201 (check only one)    X
or for	commercial purposes, other than using the r AME OF COMMITTEE (In Full) EDCO HEALTH SOLUTIONS INC. PO	name and add	dress of any political committee to	solicit contributions from such committee.
<b>4.</b> <u>N</u>	ull Name (Last, First, Middle Initial) COLETTE TAPAY ailing Address 1338 KENYON ST. N.W	<i>I</i> .		Date of Receipt
			7: 0.1	03 13 2010
Ci M	ty /ASHINGTON	State DC	Zip Code 20010	Transaction ID: INC.A.78152  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	20010	60.00
_	ame of Employer EDCO HEALTH SOLUTIONS	Occupation DIR GOV	n / AFFAIRS	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 420.00	
	ull Name (Last, First, Middle Initial) S MARY THORSBY			Date of Receipt
M:	ailing Address 17326 ELLEN DR			03 / 13 / 2010
Ci	ty VONIA	State	Zip Code	Transaction ID: INC.A.77747
FE	EC ID number of contributing deral political committee.	C	48152	Amount of Each Receipt this Period  75.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 525.00	
	ull Name (Last, First, Middle Initial) R WILLIAM TOBIN			Date of Receipt
M	ailing Address 838 COLONIAL RD			03 13 2010
Ci	ty RANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.77611
FE	EC ID number of contributing deral political committee.	C	0/11/	Amount of Each Receipt this Period  50.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio VP BENI	n EFIT SYSTEMS SUPPORT	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
SUB	TOTAL of Receipts This Page (optional)		<b>_</b>	185.00

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution of 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)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial)  MS CLAUDIA TUCKER  Mailing Address 713 INDIAN CREEK RD  City  State Zip Code  AMHERST  VA 24521  FEC ID number of contributing federal political committee.  Name of Employers  MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify)   Full Name (Last, First, Middle Initial)  MR GARY TULLY  Mailing Address 16 FIELDHEDGE DRIVE  City  State Zip Code  Nul 03 13 2.0  Transaction ID: INC. A. 77795  Amount of Each Receipt this Perin  Date of Receipt  Aggregate Year-to-Date   Transaction ID: INC. A. 77795  Amount of Each Receipt this Perin  Date of Receipt this Perin	(FEC Form 3X) CEIPTS				Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 20 (check only one)    X	<u>1</u> □ 17
A. MSCLAUDIA TUCKER  Mailing Address 713 INDIAN CREEK RD  City State Zip Code AMHERST VA 24521  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  B. Full Name (Last, First, Middle Initial)  MG GARY TULLY  Mailing Address 16 FIELDHEDGE DRIVE  City State Zip Code NJ 08844  FEC ID number of contributing federal political committee.  Date of Receipt  Transaction ID: INC.A.77984  Amount of Each Receipt this Peri  Aggregate Year-to-Date ▼  Transaction ID: INC.A.77995  Amount of Each Receipt this Peri  Date of Receipt  Date of Receipt  Transaction ID: INC.A.77995  Amount of Each Receipt this Peri  Date of Receipt  Da	poses, other than using the name and ITTEE (In Full)	commerce AME OF	or for	name and addr	lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address 16 FIELDHEDGE DRIVE  City HILLSBOROUGH NJ 08844  FEC ID number of contributing federal political committee.  Name of Employer Primary General Other (specify) ▼  City FIUI Name (Last, First, Middle Initial)  C.  Full Name (Last, First, Middle Initial)  City Financy City FRANKLIN LAKES NJ 07417  FEC ID number of contributing federal political committee.  City FRANKLIN LAKES NJ 07417  FEC ID number of contributing federal political committee.  C.  Name of Employer Mailing Address 273 STEVES LN  City FRANKLIN LAKES NJ 07417  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Coccupation NJ 07417  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Occupation VP SAFETY  Receipt For: Primary General  Aggregate Year-to-Date ▼  Primary General  Occupation VP SAFETY  Aggregate Year-to-Date ▼	Table 1 State VA State VA Contributing mmittee.  C C Coccupa SR DI Aggreg	S CLAUD ailing Ado ty MHERS EC ID nur deral polit ame of Er EDCO H	A. MS	State VA  C Occupation SR DIR G	24521	03 / 13 / 2010	
HILLSBOROUGH NJ 08844  Amount of Each Receipt this Period Section of Each Receipt Section Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  C. MS DENISE TULP  Mailing Address 273 STEVES LN  City State Zip Code Transaction ID: INC.A.77798  FRANKLIN LAKES NJ 07417  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Occupation VP SAFETY  Receipt For:  Aggregate Year-to-Date ▼  Cocupation VP SAFETY  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	fy) ▼  First, Middle Initial)	Other	<b>3.</b> M	VE	540.00	M M / D D / Y Y Y Y	
C. MS DENISE TULP  Mailing Address 273 STEVES LN  City State Zip Code FRANKLIN LAKES NJ 07417  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Date of Receipt  M M M / D D / Y Y Y O O O O O O O O O O O O O O O O	contributing mmittee.  C  SOLUTIONS  General  NJ  Occupa  DIR C  Aggreg	ILLSBO EC ID nur deral polit ame of Er EDCO H eceipt For	H FE fec Na MI	Occupation DIR CLIEN	08844  NT SVC DELIVERY  Year-to-Date ▼	Transaction ID: INC.A.77995  Amount of Each Receipt this Period  30.00	0
	273 STEVES LN  State  (ES NJ  contributing mmittee.  C  SOLUTIONS  General  Aggreg	S DENISE ailing Ado ty  RANKLI EC ID nur deral polit ame of Er EDCO H ecceipt For	Cit FI FE fec	Occupation VP SAFET	07417  TY  Year-to-Date ▼	03 / 13 / 2010	
SUBTOTAL of Receipts This Page (optional)	eipts This Page (optional)	TOTAL	SUB		•	200.00	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JEFFREY TYLER			Date of Receipt
	Mailing Address 37 KNOLL TERRACE		7'. 0.4.	03 13 2010
	City HAZLET	State NJ	Zip Code 07730	Transaction ID: INC.A.77800  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.77
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 215.39	
В.	Full Name (Last, First, Middle Initial) JEFF ULANET			Date of Receipt
	Mailing Address 8803 BELMART RD	03 13 2010		
	City POTOMAC	State MD	Zip Code	Transaction ID: INC.A.78147
	FEC ID number of contributing federal political committee.	C	20854	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUS	DEV - ONCOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
C.	Full Name (Last, First, Middle Initial) MRS JENNIFER UTTERDYKE			Date of Receipt
	Mailing Address 1881 GREENTREE R	Mailing Address 1881 GREENTREE ROAD		
	City LEBANON	State OH	Zip Code 45036	Transaction ID: INC.A.77697  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MEI	on DICATION SAFETY/QUALIT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional) .	1	<b>)</b>	105.77
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any personal the name and address of any political committee to committee to committee. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS CARA VAN ZILE Mailing Address 31 LINCOLN RD  City KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07405  C  Occupation EXEC DIR ANALYTICAL SVCS  Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.77739  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA Mailing Address W328 S4230 SPRII  City WAUKESHA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	NG RIDGE  State Zip Code WI 53189  C  Occupation SVP & GENERAL MGR  Aggregate Year-to-Date ▼	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS Mailing Address 105 ARRANDALE F  City ROCKVILLE CENTRE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 11570  C  Occupation VP MKTING  Aggregate Year-to-Date  350.00	Date of Receipt  M M M J D D J Z D 1 0  Transaction ID: INC.A.77836  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional	J)	292.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR WIL VELARDE Mailing Address 440 MEST CARDLE D	IVED DD		Date of Receipt		
	waiiiig Address 443 WEST SADDLE R	Mailing Address 443 WEST SADDLE RIVER RD				
	City	State	Zip Code	Transaction ID: INC.A.77681		
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		30.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on TECHNOLOGY			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	1		
В.	Full Name (Last, First, Middle Initial) MR DANIEL WALDEN			Date of Receipt		
	Mailing Address 450 BEECHMONT DR	03 13 2010				
	City	State	Zip Code	Transaction ID: INC.A.77904		
	NEW ROCHELLE	NY	10804	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		192.31		
	Name of Employer MEDCO HEALTH SOLUTIONS		GULATORY & MC PROGRA	мs		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	]		
С.	Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE			Date of Receipt		
		Mailing Address 5445 GOODWIN AVENUE				
	City DALLAS	State TX	Zip Code 75206	Transaction ID: INC.A.78050  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	73200	192.31		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE	on ES SEGMENT LEADER			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17			
	SUBTOTAL of Receipts This Page (optional)			414.62		
	TOTAL This Period (last page this line number		<u> </u>			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17			
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to s  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a.				
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Mailing Address 5 APPLE ORCHARI  City MOORESTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 08057  C Occupation VP/GM Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial)  MS CATHERINE WASSON  Mailing Address 3912 CALLE ANDAI  City  SAN CLEMENTE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General	State Zip Code CA 92673  C  Occupation VP NATL ACCTS Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 1 3 2 0 1 0  Transaction ID: INC.A.77614  Amount of Each Receipt this Period  50.00			
Full Name (Last, First, Middle Initial) MRS KELLY WEBBER Mailing Address 107 UPPER SADDL  City MONTVALE  FEC ID number of contributing federal political committee.	State Zip Code NJ 07645  C Occupation	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional	VP CORP HR  Aggregate Year-to-Date ▼  700.00	200.00			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t  NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal he name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. LOWELL WEINER	TOLITICAL ACTION COMMITTEE (a.n.a	Date of Receipt
Mailing Address 1 BURGESS COUR		03 13 2010
City <u>WESTFIELD</u>	State Zip Code NJ 07090	Transaction ID: INC.A.78109  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP COMMUNICATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH Mailing Address 309 WATERVIEW D	DR	Date of Receipt
City	State Zip Code	0 3 1 3 2 0 1 0 Transaction ID: INC.A.77707
FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP PRES EMPLOYER GROUP	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 1346.17	
Full Name (Last, First, Middle Initial)  C. MR KENNETH WERMES		Date of Receipt
Mailing Address 26037 N WRANGLE	R RD	03 13 2010
City	State Zip Code	Transaction ID: INC.A.77812
SCOTTSDALE FEC ID number of contributing federal political committee.	AZ 85255	Amount of Each Receipt this Period  100.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)		342.31
TOTAL This Period (last page this line numb	<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 201 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON Mailing Address 2 TIFFANY ROAD			Date of Receipt  0 3 1 3 2 0 1 0
City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.77781  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP MKTI  Aggregate		
Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN Mailing Address 145 WAUGHAW RC	DAD		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.77720
TOWACO FEC ID number of contributing federal political committee.	NJ C	07082	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS		ANCIAL & ANALYTICAL SV	С
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH Mailing Address 43 AZALEA PLACE			Date of Receipt
			03 13 2010
City <u>PISC</u> ATAWAY	State NJ	Zip Code 08854	Transaction ID: INC.A.77612  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	RRA	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional)			130.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
_	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	o solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) BRENDA WIGHT			Date of Receipt
	Mailing Address 1834 HUNTERS CRE	03 13 2010		
	City	State	Zip Code	Transaction ID: INC.A.78178
	GERMANTOWN	TN	38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP QUA	on LITY INTEGRITY HEALTH	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- В.	Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR			Date of Receipt
	Mailing Address 219 SPOOK ROCK RD.			03 13 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.77883
	SUFFERN	NY	10901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CHIEF INFO OFFICER	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
с.	Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI	1		Date of Receipt
	Mailing Address 6691 DEERVIEW DRIVE			0 3 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City LOVELAND	State OH	Zip Code 45140	Transaction ID: INC.A.77765  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	45140	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX			Date of Receipt
	Mailing Address 6527 SHORBURGH I  City	DRIVE  State	Zip Code	0 3 2 0 2 0 1 0 Transaction ID: INC.A.78251
	INDIANAPOLIS	IN	46278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n ARM PRACTICE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
ь В.	Full Name (Last, First, Middle Initial) MS BARBARA CARIGAN	1		Date of Receipt
	Mailing Address 3898 ERVA ST.			03 20 2010
	City	State	Zip Code	Transaction ID: INC.A.78760
	LAS VEGAS	NV	89147	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
- С.	Full Name (Last, First, Middle Initial) MR JASON COLE			Date of Receipt
	Mailing Address 14917 E BELLA VIST	Ā		M M / D D / Y Y Y Y Y Y Y Y 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.78464
	VERADALE  FEC ID number of contributing federal political committee.	C	99037	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional) .			75.00
ŀ	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 201 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	
/	C. POLITICAL ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS Mailing Address 4156 DUNMORE D	DIVE	Date of Receipt
City	State Zip Code	0 3 2 0 2 0 1 0  Transaction ID: INC.A.78547
LAKE WALES	FL 33859	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA		Date of Receipt
Mailing Address 2354 DOLPHIN CT		03 / 20 / Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.78480
HENDERSON	NV 89074	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.47
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.11	
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO		Date of Receipt
Mailing Address 9 GREEN HILL TRA	AIL	03 20 7 2010
City TROPHY CLUB	State Zip Code TX 76262	Transaction ID: INC.A.78551  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP NATIONAL SERVICE CENTER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional	)  }	113.47

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for con	mation copied from such Reports and Sta nmercial purposes, other than using the n OF COMMITTEE (In Full) CO HEALTH SOLUTIONS INC. PC	name and add	ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.  . Medco Health PAC)
A. Full N MR BE Mailing City HELC FEC I federa Name MEDO Recei	ame (Last, First, Middle Initial) ERNARD HUKILL  D Address 17219 CLOVIS  DTES  D number of contributing I political committee.  of Employer CO HEALTH SOLUTIONS	State TX  C  Occupation DIR PHAI	Zip Code 78023	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 2 0 1 0  Transaction ID: INC.A.78586  Amount of Each Receipt this Period  50.00
B. MR RI Mailing City CAR FEC I federa Name MEDO Recei	D number of contributing I political committee. of Employer CO HEALTH SOLUTIONS	State IN C Occupation VP/GM	Zip Code 46032 Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. MR RC Mailing City GIBS FEC I federa Name MEDO Recei	ame (Last, First, Middle Initial)  DSS LUCE  G Address 1066 WEST GROVE CT  GONIA  D number of contributing I political committee.  of Employer CO HEALTH SOLUTIONS  ot For:  Primary General  Other (specify)	State PA C Occupation VP/GM	Zip Code 15044 Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 2 0 1 0  Transaction ID: INC.A.78375  Amount of Each Receipt this Period  30.00
	TAL of Receipts This Page (optional) This Period (last page this line number or		<u> </u>	105.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	for each	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 99 / 201 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS I	ng the name and address of a	ny political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MRS CATHY PATTEN  Mailing Address 2001 MEADOWS	AVENUE		Date of Receipt
City LANTANA	State Zip (	Code 26	Transaction ID: INC.A.78531  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation		25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	VP/GM Aggregate Year-to-I	Date ▼ 325.00	
Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS Mailing Address 2780 FOLKSTON	E ROAD		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip (	Code	Transaction ID: INC.A.78334
COLUMBUS	OH 432	20	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-I	Date ▼ 325.00	
Full Name (Last, First, Middle Initial) MR GILBERT RAINES	1		Date of Receipt
Mailing Address 800 SANDY TRA	L		03 20 20 2010
City KELLER	State Zip ( TX 762	Code	Transaction ID: INC.A.78715
FEC ID number of contributing federal political committee.	C 702	40	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-I	Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optic	nal)		75.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	e name and add	dress of any political committee to	o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CREEK City	AVE State	Zip Code	Date of Receipt  0 3 2 0 2 0 1 0  Transaction ID: INC.A.78513
	LAS VEGAS FEC ID number of contributing federal political committee.	NV C	89148	Amount of Each Receipt this Period 60.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		OLOGY TRC OPS  e Year-to-Date  780.00	
	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE Mailing Address 6108 HUNTER LANE	1		Date of Receipt  0 3 2 0 2 0 1 0
	City COLLEYVILLE	State TX	Zip Code	Transaction ID: INC.A.78542
	FEC ID number of contributing federal political committee.	C	76034	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 325.00	
	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT Mailing Address 8362 GOLDEN PRAIF	RIE DRIVE		Date of Receipt  0 3 2 0 2 0 1 0
	City TAMPA	State FL	Zip Code	Transaction ID: INC.A.78401
	FEC ID number of contributing federal political committee.	C	33647	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify)	<del>, '</del>	e Year-to-Date ▼ 650.00	
Ę	SUBTOTAL of Receipts This Page (optional)			135.00

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 101 / 201   (check only one)     X
Any information copied from su or for commercial purposes, ot	uch Reports and Statements may her than using the name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (III MEDCO HEALTH SOL	•	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Midd MR CALVIN WASDYKE	fle Initial)		Date of Receipt
Mailing Address 5 APPL	E ORCHARD RD		03 20 2010
City	State	Zip Code	Transaction ID: INC.A.78526
MOORESTOWN FEC ID number of contribut federal political committee.	ing NJ	08057	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTI	Occupation VP/GM	n	
Receipt For:  Primary Ger  Other (specify) ▼		Year-to-Date ▼ 650.00	
Full Name (Last, First, Mido MR JAMES ZIRPOLI	lle Initial)		Date of Receipt
	EERVIEW DRIVE		03 / 20 / 2010
City LOVELAND	State OH	Zip Code 45140	Transaction ID: INC.A.78440  Amount of Each Receipt this Period
FEC ID number of contribut federal political committee.		10110	25.00
Name of Employer MEDCO HEALTH SOLUTI	Occupation VP/GM	n	
Receipt For:  Primary Ger  Other (specify) ▼		Year-to-Date ▼ 325.00	
Full Name (Last, First, Midd	lle Initial)		Date of Receipt
Mailing Address 1 STIRI	LING ROAD		03 26 2010
City BERNARDSVILLE	State NJ	Zip Code 07924	Transaction ID: INC.A.78217
FEC ID number of contribut federal political committee.		0/324	Amount of Each Receipt this Period 5000.00
Name of Employer MEDCO HEALTH SOLUTI INC.	Ons, Occupation VP AND	n ASSISTANT GENERAL CO	DUNSEL
Receipt For: Primary Ger Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This	Page (optional)		5075.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>3X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 201 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	ng the name and ado	lress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS LESLIE ACHTER Mailing Address 821 ALBEMARLE City	STREET State	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
WYCKOFF  FEC ID number of contributing federal political committee.	NJ	07481	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼		YTICAL SVCS Year-to-Date ▼ 350.00	]
Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK  Mailing Address 1021 SUNSET RI	DGE		Date of Receipt  0 3 2 7 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.78283
BRIDGEWATER  FEC ID number of contributing federal political committee.	NJ C	08807	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		RM CONTRACT & CONSUL Year-to-Date ▼ 350.00	TING
Full Name (Last, First, Middle Initial) MR STEPHEN ADLER			Date of Receipt
Mailing Address 139 BELLVALE L	AKES RD		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City WARWICK	State NY	Zip Code 10990	Transaction ID: INC.A.78372  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
			150.00

SCHEDULE A ITEMIZED REC	•		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purpo	oses, other than using the nan TTEE (In Full)	ne and add	not be sold or used by any persoress of any political committee to a CTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions solicit contributions from such committee.  I. Medco Health PAC)
Full Name (Last, Fir DR JODY ALLEN Mailing Address 3  City MIDLOTHIAN  FEC ID number of of federal political community Mane of Employer MEDCO HEALTH S  Receipt For:  Primary Other (specify	contributing mittee.  SOLUTIONS		Zip Code 23113 CAL POLICY-GOV AFFAIR Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 2 7 2 0 1 0  Transaction ID: INC.A.78371  Amount of Each Receipt this Period  50.00
Full Name (Last, Fir MARENE ALLISON Mailing Address 4  City  DOYLESTOWN  FEC ID number of of federal political com  Name of Employer MEDCO HEALTH S  Receipt For:  Primary  Other (specify	contributing mittee.  SOLUTIONS		Zip Code 18901 IRITY & ASSET PROTECTI Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.78751  Amount of Each Receipt this Period  50.00
Full Name (Last, Fir MR JAMES ALLOCO Mailing Address 1  City SCARSDALE  FEC ID number of of federal political com  Name of Employer MEDCO HEALTH:  Receipt For: Primary Other (specify	9 ROSS ROAD  contributing mittee.  GOLUTIONS		Zip Code 10583 TECHNOLOGY Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 2 7 2 0 1 0  Transaction ID: INC.A.78451  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receip	ots This Page (optional)		<b>&gt;</b>	150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
,	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) TEJWANSH ANAND			Date of Receipt
	Mailing Address 10 WHIPPOORWILL	LAKE ROAD	)	03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78711
	CHAPPAQUA FEC ID number of contributing	NY	10514	Amount of Each Receipt this Period
	federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFC	on O TECHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
_ В.	Full Name (Last, First, Middle Initial) DENNIS AUCH			Date of Receipt
	Mailing Address 1981 E. COVEY VIEV	V COURT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.78857
	SALT LAKE CITY	UT	84106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	350.00	
_ С.	Full Name (Last, First, Middle Initial) ERIK BAGIN			Date of Receipt
	Mailing Address 73 HIGHLAND AVEN	UE		03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78756
	GLEN RIDGE	NJ	07028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	]
	SUBTOTAL of Receipts This Page (optional) .			150.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 201 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS BECKIE BARATKO Mailing Address 80 N. WOODLAND	STREET	Date of Receipt
City ENGLEWOOD	State Zip Code NJ 07631	Transaction ID: INC.A.78637  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROPOSAL UNIT	50.00
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial) MR THOMAS BARATTA Mailing Address 69 SKYLINE DR		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City UPPER SADDLE RIVER	State Zip Code NJ 07458	Transaction ID: INC.A.78556  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS ROBYN BARILLARI Mailing Address 3 DELANEY COUR	T	Date of Receipt  0 3 2 7 2 0 1 0
City BRIDGEWATER	State Zip Code NJ 08807	Transaction ID: INC.A.78762  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MEDICARE OPS	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  210.00	
	<b>1</b>	130.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JANE BARLOW  Mailing Address 3 AVALON COURT			Date of Receipt
				03 27 2010
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.78797  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12000	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MED	n ICAL POLICIES	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) MR MICHAEL BARONE			Date of Receipt
	Mailing Address 452 MEDWAY ROAD			03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78832
	HIGHLAND HEIGHTS  FEC ID number of contributing federal political committee.	OH	44143	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n GENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1344.00	
C.	Full Name (Last, First, Middle Initial) MR DAVID BAUGH			Date of Receipt
	Mailing Address 1813 ADONIS AVE			03 27 2010
	City HENDERSON	State NV	Zip Code 89074	Transaction ID: INC.A.78694
	FEC ID number of contributing federal political committee.	C	89074	Amount of Each Receipt this Period  58.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio MGR BE	n NEFIT DELIVERY SYSTEM	s
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 406.00	
	SUBTOTAL of Receipts This Page (optional)	1		300.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 201 (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ename and address of any political committee to so	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN BELL  Mailing Address 24 GLENWOOD ROA  City UPPER SADDLE RIVER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07458  C  Occupation VP FINANCE  Aggregate Year-to-Date  350.00	Date of Receipt  M M M
Full Name (Last, First, Middle Initial) INDERPAL BHANDARI  Mailing Address 220 ARDSLEY ROAD  City SCARSDALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10583  C  Occupation VP CLINICAL SVCS  Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN Mailing Address 4520 LINWOOD LANE  City DEEPHAVEN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code MN 55331  C  Occupation SVP CLIENT & MKT STRATEGIC DEV Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.78693  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16
0	ny information copied from such Reports and story commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
/	MEDCO HEALTH SOLUTIONS INC.  Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN	POLITICAL /	ACTION COMMITTEE (a.k.a	Date of Receipt
	Mailing Address 50 NEW ENGLAND D	)R		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.78509  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MKT	n ING & PRODUCT DEV	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) MR STEVEN BLOOM			Date of Receipt
	Mailing Address 17818 ARBOR GREE	03 27 2010		
	City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.78508  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	000+7	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FIEL		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) KEN BODMER			Date of Receipt
	Mailing Address P.O. BOX 381947			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City GERMANTOWN	State TN	Zip Code 38183	Transaction ID: INC.A.78599  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio COO - A	n CCREDO HEALTH GROUP	INC
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1344.00	
	SUBTOTAL of Receipts This Page (optional).	1		292.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may not be sold or used by any personing the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	NC. POLITICAL ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX		Date of Receipt
Mailing Address 6527 SHORBUR		03 / 27 / 2010
City INDIANAPOLIS	State Zip Code IN 46278	Transaction ID: INC.A.78252  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN		Date of Receipt
Mailing Address 5259 FISHERCR	EST LN	03 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.78645
RICHMOND  FEC ID number of contributing federal political committee.	VA 23231	Amount of Each Receipt this Period  200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FORMULARY CONSULTING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	
Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN		Date of Receipt
Mailing Address 15 DAWN LANE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RINGWOOD	State Zip Code NJ 07456	Transaction ID: INC.A.78690  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR STRAT PRODUCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	onal)	275.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS PATRICIA BRANUM			Date of Receipt
	Mailing Address 210 FROG HOLLOW	ROAD		03 27 2010
	COATESYULE	State	Zip Code	Transaction ID: INC.A.78626
	COATESVILLE FEC ID number of contributing	PA	19320	Amount of Each Receipt this Period
	federal political committee.	С		85.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	on ) & PROCESS ENGINEERIN	IG
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Other (specify)		595.00	
В.	Full Name (Last, First, Middle Initial) MR JOHN BRENNAN			Date of Receipt
	Mailing Address 2 CARMEN LANE			0 3 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.78739
	FLEMINGTON FEO. ID. and the street of the st	NJ	08822	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP AUD		
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Other (specify)		350.00	
C.	Full Name (Last, First, Middle Initial) MR KENNETH BROWN			Date of Receipt
	Mailing Address 540 GIORDANO DRIV	/E		0 3 2 7 2 0 1 0
	City YORKTOWN HEIGHTS	State NY	Zip Code 10598	Transaction ID: INC.A.78339  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENTI	on ERPRISE BUS INTELLIGEN	— C <b>€</b>
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			185.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 111 / 201   (check only one)     X
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may no	ot be sold or used by any perso ss of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	NC. POLITICAL AC	TION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial)  AMANDA BUNDY			Date of Receipt
Mailing Address 5812 SEVEN PO	INTS TRACE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HERMITAGE	State TN	Zip Code 37076	Transaction ID: INC.A.78853  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	57070	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIMBI	JRSEMENT	
Receipt For: Primary General Other (specify)		ear-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR KEVIN BURON			Date of Receipt
Mailing Address 25 TIMBERLAND	1		0 3 2 7 Y Y Y Y Y
City ALISO VIEJO	State CA	Zip Code 92656	Transaction ID: INC.A.78483
FEC ID number of contributing federal political committee.	C	92030	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		1
Receipt For:  Primary General  Other (specify) ▼		ear-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  MRS DOREEN CALDER			Date of Receipt
Mailing Address 441 S ELM STRE	ET		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.78249
MAYWOOD  FEC ID number of contributing federal political committee.	NJ C	07607	Amount of Each Receipt this Period 40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PROD	UCT DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	ear-to-Date ▼ 280.00	
SUBTOTAL of Receipts This Page (option	nal)		140.00
SUBTOTAL of Receipts This Page (option  TOTAL This Period (last page this line no	,	•	140.00

SCHEDULE A ( ITEMIZED REC	EIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 17  on for the purpose of soliciting contributions
or for commercial purpos  NAME OF COMMIT	ses, other than using the name a FEE (In Full)	nd address of any political committee to	solicit contributions from such committee.
Full Name (Last, Firs	CCI		Date of Receipt
Mailing Address 11	9 WASHINGTON AVENUE		03 27 2010
City	Sta	·	Transaction ID: INC.A.78578
<u>CHATHAM</u>	N.	J 07928	Amount of Each Receipt this Period
FEC ID number of co federal political comm			192.31
Name of Employer MEDCO HEALTH So	OLUTIONS Occ SVF	upation P & CONTROLLER	
Receipt For: Primary Other (specify)	General	regate Year-to-Date ▼ 1346.17	
Full Name (Last, Firs MS BARBARA CARIG Mailing Address 38	AN		Date of Receipt
City	Sta	ate Zip Code	03 27 2010
LAS VEGAS	N\	·	Transaction ID: INC.A.78761  Amount of Each Receipt this Period
FEC ID number of co	entributing		25.00
Name of Employer MEDCO HEALTH So	OCC DIR	upation HR	
Receipt For: Primary Other (specify)	General	regate Year-to-Date ▼ 325.00	
Full Name (Last, Firs MR RAYMOND CARL			Date of Receipt
Mailing Address 24	SHERI DRIVE		03 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	Sta	ate Zip Code	Transaction ID: INC.A.78594
ALLENDALE	N.	J 07401	Amount of Each Receipt this Period
FEC ID number of co federal political comm			52.50
Name of Employer ACCREDO HEALTH		upation OUP VP MARKET STRATEGY &	DEV
Receipt For: Primary Other (specify)	General	regate Year-to-Date ▼ 367.50	
SUBTOTAL of Receipt	s This Page (optional)		269.81

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 201 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JASON COLE			Date of Receipt
Mailing Address 14917 E BELLA VISTA	1		03 27 2010
City	State	Zip Code	Transaction ID: INC.A.78465
VERADALE	WA	99037	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) JEFFREY COOLE			Date of Receipt
Mailing Address 155 ASTON HALL DRI	VE		0 3 2 7 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.78851
<u>EADS</u>	TN	38028	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio VP TAX	n AND REGULATORY REPOR	<del></del>   शा
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) ANTONIO CORREIA			Date of Receipt
Mailing Address 19 WILLIAMS LANE			03 27 2010
City	State	Zip Code	Transaction ID: INC.A.78782
CHAPPAQUA	NY	10514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BUSI	n NESS DEV	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)			125.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS BARBARA COSGRIFF			Date of Receipt
	Mailing Address 2045 MAYFAIR MCLE			03 / 27 / 2010
	City <u>FALLS CHURCH</u>	State VA	Zip Code 22043	Transaction ID: INC.A.78824  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP PUE	n BLIC POL&EXTRNL AFFAIR	S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1365.00	
В.	Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN Mailing Address 25 FAIRWAY TRAIL			Date of Receipt
				03 27 2010
	City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.78452  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0,0,1	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP PH	n ARMACY NETWORK MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.17	
с. С.	Full Name (Last, First, Middle Initial) MR HART COVEN			Date of Receipt
	Mailing Address 28 OAK LANE			0 3 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.78563
	MORRISTOWN  FEC ID number of contributing federal political committee.	NJ C	07960	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BIAC		
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			437.31
	TOTAL This Period (last page this line number of		·	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17	
or for commercial purposes, other than us	and Statements may not be sold or used by any persoing the name and address of any political committee to	on for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	INC. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
Full Name (Last, First, Middle Initial)  MR ROBERT CRAIG  Mailing Address 7979 E SANTA (	NATALINA DD	Date of Receipt	
City	State Zip Code	0 3 2 7 2 0 1 0  Transaction ID: INC.A.78434	
SCOTTSDALE	AZ 85255	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	60.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR PRODUCT		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS		Date of Receipt	
Mailing Address 4156 DUNMORE	Mailing Address 4156 DUNMORE DRIVE		
City	State Zip Code	0 3 2 7 2 0 1 0 Transaction ID: INC.A.78548	
LAKE WALES	FL 33859	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	25.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For:	Aggregate Year-to-Date ▼	_	
Primary General Other (specify) ▼	325.00		
Full Name (Last, First, Middle Initial) MS MARY DASCHNER		Date of Receipt	
Mailing Address 2926 EWING AV	ES	03 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: INC.A.78413	
MINNEAPOLIS  FEC ID number of contributing federal political committee.	MN 55416	Amount of Each Receipt this Period  192.30	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP PRES RETIREE SOLUTION	IS	
Receipt For: Primary General	Aggregate Year-to-Date ▼		
Other (specify)	1346.10		
SUBTOTAL of Receipts This Page (option	onal)	277.30	
TOTAL This Period (last page this line n	umber only)		

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 201 (check only one)    X
or for	formation copied from such Reports and St commercial purposes, other than using the ME OF COMMITTEE (In Full) EDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	
A. MF Ma Cit EC FE fed Na ME	OINA C ID number of contributing leral political committee.  me of Employer EDCO HEALTH SOLUTIONS	State MN C	Zip Code 55439 n ATEGIC INIT/GOVT PROGR	Date of Receipt  0 3
Re	ceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
<b>B.</b> MF	Il Name (Last, First, Middle Initial) R BARRY DAVIS siling Address 11 WEISS DR	State	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<u>TC</u> FE	OWACO  C ID number of contributing leral political committee.	NJ	07082	Amount of Each Receipt this Period
	me of Employer EDCO HEALTH SOLUTIONS  ceipt For: Primary General Other (specify)	_	n ENERAL MGR Year-to-Date ▼ 1344.00	]
). <u>M</u> F	II Name (Last, First, Middle Initial) R DANIEL DAVISON iiling Address 908 STERLING DRIVE	:		Date of Receipt  0 3 2 7 2 0 1 0
	RANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.78595  Amount of Each Receipt this Period
fed	C ID number of contributing leral political committee.  me of Employer EDCO HEALTH SOLUTIONS	Occupatio		50.00
	ceipt For: Primary General Other (specify)		ANCIAL PLANNING  e Year-to-Date ▼  350.00	
SUB	FOTAL of Receipts This Page (optional)			292.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any per given name and address of any political committee IC. POLITICAL ACTION COMMITTEE (a.)	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR CARLTON DEBRULE Mailing Address 12 0AKLAND DR  City	State Zip Code	Date of Receipt  0 3 2 7 2 0 1 0  Transaction ID: INC.A.78641
MONTVALE FEC ID number of contributing federal political committee.	NJ 07645	Amount of Each Receipt this Period 55.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼	Occupation VP BUSINESS REQUIREMENTS Aggregate Year-to-Date  385.00	
Full Name (Last, First, Middle Initial)  MICHEL DUFRESNE  Mailing Address 41ELM ST APT 3F		Date of Receipt  0 3
City	State Zip Code	Transaction ID: INC.A.78717
MORRISTOWN	NJ 07960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENTERPRISE BUS INTELLIGI	ENCE
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1346.10	
Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY		Date of Receipt
Mailing Address 14026 KNOX STR	EET	03 27 2010
City	State Zip Code	Transaction ID: INC.A.78378
OVERLAND PARK  FEC ID number of contributing federal political committee.	KS 66221	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES SEGMENT LEADER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SURTOTAL of Receipts This Page (option	al)	297.30

City State Zip Code NJ 07481  WYCKOFF NJ 07481  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD  Date of Receipt	: PAGE 118/201  11c 12  15 16 11
MR MARK DUNN Mailing Address 2 OLD MILL ROAD  City SANDY HOOK CT 06482  Transaction ID: 1 Amount of Each F  EC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ 245.00  Pate of Receipt To: Primary General Other (specify) ▼ 245.00  Date of Receipt To: Primary General Other (specify) ▼ 245.00  Date of Receipt To: Primary General Other (specify) ▼ 245.00  Date of Receipt To: Primary General Other (specify) ▼ 245.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00  Date of Receipt To: Primary General Other (specify) ▼ 350.00	n such committee.
FEC ID number of contributing federal political committee.  Name of Employer MEDOO HEALTH SOLUTIONS  Receipt For:    Primary	7 2 0 1 0 NC.A.78351
Receipt For:	35.00
MR MICHAEL EDWARDS  Mailing Address 109 KAREN PLACE  City  WYCKOFF  NJ  07481  FEC ID number of contributing federal political committee.  Name of Employer NEDCO HEALTH SOLUTIONS  Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD  Mailing Address 128 SUMMIT AVENUE  City  State  State  Zip Code  NAMOUNT of Each F  C  Doccupation  VP/GM  Aggregate Year-to-Date  Aggregate Year-to-Date  Date of Receipt  M M M J D T G O M M M M M M M M M M M M M M M M M M	
WYCKOFF  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD  Mailing Address 128 SUMMIT AVENUE  City State Zip Code Transaction ID: I Amount of Each F  EC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Coccupation MEDICARE CHIEF MEDICAL OFFICER  Receipt For:  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: I Amount of Each F  Coccupation MEDICARE CHIEF MEDICAL OFFICER  Aggregate Year-to-Date ▼	7 2010
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD  Mailing Address 128 SUMMIT AVENUE  City State Zip Code Transaction ID: I  UPPER MONTCLAIR NJ 07043  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Name of Employer MEDICAL OFFICER  Receipt For:  Aggregate Year-to-Date ▼	
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary Other (specify) ▼  Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD  Mailing Address 128 SUMMIT AVENUE  City UPPER MONTCLAIR NJ 07043  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: I  Amount of Each F  C  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	Receipt this Period
Receipt For:  Primary Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD  Mailing Address 128 SUMMIT AVENUE  City State Zip Code UPPER MONTCLAIR NJ 07043  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Aggregate Year-to-Date ▼  Occupation MEDICARE CHIEF MEDICAL OFFICER  Aggregate Year-to-Date ▼	50.00
Primary General Other (specify) ▼  State Zip Code UPPER MONTCLAIR  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Aggregate Year-to-Date ▼  State 350.00  Date of Receipt  Date of Receipt  Transaction ID: I  Occupation MEDICARE CHIEF MEDICAL OFFICER  Aggregate Year-to-Date ▼	
Date of Receipt  Mailing Address 128 SUMMIT AVENUE  City State Zip Code UPPER MONTCLAIR  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Date of Receipt  Transaction ID: I  Occupation MEDICARE CHIEF MEDICAL OFFICER  Aggregate Year-to-Date ▼	
City State Zip Code Transaction ID: I  UPPER MONTCLAIR  NJ 07043  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Os 2  Transaction ID: I  Occupation MEDICARE CHIEF MEDICAL OFFICER  Aggregate Year-to-Date ▼	
UPPER MONTCLAIR  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Name of Employer MEDICARE CHIEF MEDICAL OFFICER  Aggregate Year-to-Date ▼	7 2010
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Aggregate Year-to-Date ▼	
Receipt For:  Aggregate Year-to-Date ▼	50.00
Other (specify) ▼  300.00	
SUBTOTAL of Receipts This Page (optional)	135.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN Mailing Address 359 LONG HILL ROAI	DEAST		Date of Receipt
		D LAGI		03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78746
	BRIARCLIFF MANOR	NY	10510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP COR	n P COMMUNICATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN			Date of Receipt
	Mailing Address 75 TWEED BLVD			03 / 27 / 2010
	City	State	Zip Code	Transaction ID: INC.A.78241
	UPPER GRANDVIEW	NY	10960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS		P MEDICAL&ANLYTC AFF	RS
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
С.	Full Name (Last, First, Middle Initial) MR SCOTT ERHARDT			Date of Receipt
	Mailing Address 11540 39TH AVE N			03 / 27 / 2010
	City PLYMOUTH	State MN	Zip Code	Transaction ID: INC.A.78437
	FEC ID number of contributing federal political committee.	C	55441	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC D	n IR ACCT MGMT	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			292.31
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 201 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	no for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI			Date of Receipt
Mailing Address 15804 SORAWATE		75.00-15	03 27 2010
City	State	Zip Code	Transaction ID: INC.A.78360
LITHIA  FEC ID number of contributing federal political committee.	FL C	33547	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	_
MEDCO HEALTH SOLUTIONS		CCT EXEC	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	350.00	
Full Name (Last, First, Middle Initial) RICHARD FARIS	<b>'</b>		Date of Receipt
Mailing Address 2020 HEATHER Co	OVE		03 27 2010
City	State	Zip Code	Transaction ID: INC.A.78874
<u>MEMPHIS</u>	TN	38119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP HEAL	n LTH OUTCOME SOLUTION	s
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) SUSAN FAUST			Date of Receipt
Mailing Address 6614 HERONSWO	OD COVE		03 27 2010
City	State	Zip Code	Transaction ID: INC.A.78843
MEMPHIS	TN	38119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLIE	n NT SLS AND MGD CARE	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		350.00	
SUBTOTAL of Receipts This Page (optional	al)	<b>)</b>	150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 201 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA Mailing Address 2354 DOLPHIN CT			Date of Receipt  O 3
City HENDERSON  FEC ID number of contributing federal political committee.	State NV	Zip Code 89074	Transaction ID: INC.A.78481  Amount of Each Receipt this Period  38.47
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>-                                     </del>	n ARM PRACTICE e Year-to-Date ▼ 500.11	
Full Name (Last, First, Middle Initial) DR RICHARD FEIFER Mailing Address 32 EILEEN DR			Date of Receipt  0 3
City  MAHWAH  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07430	Transaction ID: INC.A.78421  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	- t	n E ENHANCING SOLUTIONS e Year-to-Date ▼ 350.00	<u>S</u>
Full Name (Last, First, Middle Initial) MR THOMAS FEITEL Mailing Address 58 APPLE HILL DR			Date of Receipt
City GILLETTE  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07933	0 3 2 7 2 0 1 0  Transaction ID: INC.A.78484  Amount of Each Receipt this Period  192.23
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	<del>- '</del>	n RP MKTG & E-COMM • Year-to-Date ▼ 1345.61	
SUBTOTAL of Receipts This Page (optional)			280.70

SCHEDULE A (FEC Form ITEMIZED RECEIPTS  Any information copied from such Bend	for each category of the  Detailed Summary Page  rts and Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 122 / 201 (check only one)    X
or for commercial purposes, other than  NAME OF COMMITTEE (In Full)	using the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR EDWARD FISCHER Mailing Address 465 OLD STOI		Date of Receipt
City	State Zip Code	0 3 2 7 2 0 1 0 Transaction ID: INC.A.78407
RIDGEWOOD	NJ 07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL PROD INTEGRATION	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MEGHAN FITZGERALD		Date of Receipt
Mailing Address 6 MORGAN A	/E	03 27 2010
City	State Zip Code	Transaction ID: INC.A.78804
NORWALK  FEC ID number of contributing federal political committee.	CT 06851	Amount of Each Receipt this Period  192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUSINESS DEVELOPMENT	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1346.17	
Full Name (Last, First, Middle Initial) KEVIN FRANCO		Date of Receipt
Mailing Address 140 BELLAIR I UNIT Q	ROAD	03 27 2010
City RIDGEWOOD	State Zip Code NJ 07450	Transaction ID: INC.A.78611  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (or	otional)	292.31

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt
	Mailing Address 9 GREEN HILL TRAIL	-		03 27 4 2010
	City TROPHY CLUB	State TX	Zip Code 76262	Transaction ID: INC.A.78552
	FEC ID number of contributing federal political committee.	C	70202	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP NA	on TIONAL SERVICE CENTER	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
В.	Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL			Date of Receipt
	Mailing Address 1434 NARRAGANSE	ΓΤ BLVD	03 27 2010	
	City	State	Zip Code	Transaction ID: INC.A.78370
	CRANSTON	RI	02905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR GO	on V AFFAIRS	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼	0 0	210.00	
с. С.	Full Name (Last, First, Middle Initial) FELIX FRUEH			Date of Receipt
	Mailing Address 14401 FALLING LEAF	DRIVE		03 27 YYYY 03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78805
	DARNESTOWN FEC ID number of contributing	MD	20878	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		EARCH & DEVELOPMENT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)	•		130.00
ŀ	TOTAL This Period (last page this line number		<u> </u>	

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any infor or for cor	mation copied from such Reports and Simmercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\	E OF COMMITTEE (In Full) ICO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
MR T	lame (Last, First, Middle Initial) RACY FURGIUELE			Date of Receipt
Mailin ——— City	g Address 7773 TILLINGHAST DI	RIVE State	Zip Code	0 3 2 7 2 0 1 0  Transaction ID: INC.A.78630
<u>DUB</u>	LIN	OH	43017	Amount of Each Receipt this Period
	D number of contributing al political committee.	C		35.00
Name MED	of Employer CO HEALTH SOLUTIONS	Occupation SVP & C	n HIEF PHARMACIST	
	pt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 245.00	
	lame (Last, First, Middle Initial) DSEPH GALARDI			Date of Receipt
Mailin	g Address 24 MOREHOUSE PL			03 / 27 / 2010
City	/ DDOV/DENOE	State	Zip Code	Transaction ID: INC.A.78237
FEC	/ PROVIDENCE  ID number of contributing all political committee.	C	07974	Amount of Each Receipt this Period 50.00
Name MÉD	of Employer CO HEALTH SOLUTIONS	Occupation VP & CO		
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
MS P	lame (Last, First, Middle Initial) AMELA GALASSINI			Date of Receipt
	g Address 720 N. LARRABEE APT 1701	01-1-	7'- O-d-	03 27 2010
City CHIO	CAGO	State IL	Zip Code 60654	Transaction ID: INC.A.78689  Amount of Each Receipt this Period
FEC	ID number of contributing al political committee.	C		192.31
Name MED	of Employer CO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.17	
SUBTO	TAL of Receipts This Page (optional)			277.31
	This Period (last page this line number of		·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 201 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	lress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO Mailing Address 69 LAKEVIEW DR  City	State	Zip Code	Date of Receipt    Mam   Date   Date
OLD TAPPAN  FEC ID number of contributing federal political committee.	NJ C	07675	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>- ' '</del>	NT RELATIONS  Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial)  MICHAEL GALVIN  Mailing Address 25 BALLYMEADE R	OAD		Date of Receipt  0 3 2 7 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.78722
HOPEWELL JUNCTION  FEC ID number of contributing federal political committee.	C	12533	Amount of Each Receipt this Period  192.31
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼	<del>-   '</del>	TEF INFRASTRUCTURE OF Year-to-Date ▼ 1346.17	FR 1
Full Name (Last, First, Middle Initial)  MR PETER GAYLORD			Date of Receipt
Mailing Address 1201 BRIDGE STRE	EET		03 27 2010
City ASBURY PARK	State NJ	Zip Code	Transaction ID: INC.A.78236
FEC ID number of contributing federal political committee.	C	07712	Amount of Each Receipt this Period  60.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP TRE	n ASURY & FINANCIAL EVA	LS
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	
SUBTOTAL of Receipts This Page (optional)	)	······	302.31
TOTAL This Period (last page this line numb	per only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 126 / 201   (check only one)
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may ng the name and addr	not be sold or used by any person ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS II	NC. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA Mailing Address 20 BROOKSHIRE	- DD		Date of Receipt
	State	Zin Codo	03 27 2010
City ROBBINSVILLE	NJ	Zip Code 08691	Transaction ID: INC.A.78384  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MATTHEW GIBBS	l .		Date of Receipt
Mailing Address 27 N. WACKER [ SUITE 246			03 / 27 / Y Y Y Y Y Y Y
City CHICAGO	State IL	Zip Code 60606	Transaction ID: INC.A.78792  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF CL	INICAL OFFICER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) MR THOMAS GILSON	<u> </u>		Date of Receipt
Mailing Address 2 PELL FARM RC	DAD		03 27 2010
City SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.78681
FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GE	ENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 1346.17	
SUBTOTAL of Receipts This Page (optio	nal)		317.31

SCHEDULE A (FEC	·	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 201 (check only one)    X
or for commercial purposes, oth  NAME OF COMMITTEE (Ir	er than using the name and addre	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Midd	JTIONS INC. POLITICAL AC	CTION COMMITTEE (a.k.a	,
MR SCOTT GILYARD  Mailing Address 305 BEI	RGAMOT DRIVE		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City MEDINA	State MN	Zip Code 55340	Transaction ID: INC.A.78242  Amount of Each Receipt this Period
FEC ID number of contributi federal political committee.	C	1 1 1 1	192.30
Name of Employer MEDCO HEALTH SOLUTION	PRES UNC		
Receipt For:  Primary Gen  Other (specify) ▼		/ear-to-Date ▼ 1346.10	
Full Name (Last, First, Midd MR JONAH GITLITZ			Date of Receipt
Mailing Address 43 OVE	RLOOK RIDGE		03 27 2010
City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.78323
FEC ID number of contributi federal political committee.		07430	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation SR NATL /	ACCT EXEC	
Receipt For:  Primary Gen  Other (specify) ▼		'ear-to-Date ▼ 350.00	
Full Name (Last, First, Midd MR PAUL GOERDT	e Initial)		Date of Receipt
Mailing Address 1700 St	INRISE COURT		03 27 2010
City BURNSVILLE	State MN	Zip Code 55306	Transaction ID: INC.A.78496  Amount of Each Receipt this Period
FEC ID number of contributi federal political committee.			50.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation VP CLINIC	CAL SVCS	
Receipt For:  Primary Gen  Other (specify) ▼	55 5	'ear-to-Date ▼ 350.00	
SUBTOTAL of Receipts This	Page (optional)		292.30

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 201 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to be political. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES GRANT, II Mailing Address 1928 BEVERLY LAN City BUFFALO GROVE	NE State Zip Code IL 60089	Date of Receipt  0 3 2 7 2 0 1 0  Transaction ID: INC.A.78398  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP FINANCIAL INSIGHTS Aggregate Year-to-Date  350.00	
Full Name (Last, First, Middle Initial) MS GINA GRUHN Mailing Address 13 WEATHER VAN	E DRIVE	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.78472
CONVENT STATION  FEC ID number of contributing federal political committee.	NJ 07960	Amount of Each Receipt this Period 40.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation REGIONAL VP SALES-SYSTEMED Aggregate Year-to-Date  280.00	
Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD		Date of Receipt
Mailing Address 264 HARVEST AVE		03 27 2010
City	State Zip Code	Transaction ID: INC.A.78317
STATEN ISLAND  FEC ID number of contributing federal political committee.	NY 10310	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CONSUMER DRIVEN MKTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 129 / 201   (check only one)     X
Any info	ormation copied from such Reports and Sommercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	IE OF COMMITTEE (In Full) DCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
	Name (Last, First, Middle Initial)			Date of Receipt
Maili	ng Address 50 BELLEVUE AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	A) 41 T	State	Zip Code	Transaction ID: INC.A.78260
FEC	MMIT  ID number of contributing ral political committee.	C	07901	Amount of Each Receipt this Period  90.00
Nam MED	e of Employer OCO HEALTH SOLUTIONS	Occupatio GROUP		
Rece	eipt For: Primary General Other (specify)		e Year-to-Date ▼ 630.00	
	Name (Last, First, Middle Initial) /ALERIE HAERTEL			Date of Receipt
Maili	ng Address 7 PARSLOE COURT			0 3 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	HWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.78776  Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C	07430	50.00
Nam MED	e of Employer OCO HEALTH SOLUTIONS	Occupatio VP INVE	n STOR RELATIONS	
Rece	eipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	]
	Name (Last, First, Middle Initial) GREGORY HANSEN	<u> </u>		Date of Receipt
	ng Address 1659 ISABELLA PARI	KWAY		03 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	ASKA	State	Zip Code	Transaction ID: INC.A.78688
FEC	ID number of contributing ral political committee.	C	55318	Amount of Each Receipt this Period  50.00
Nam MED	e of Employer CO HEALTH SOLUTIONS	Occupatio VP ACC	n T SVCS & ADMIN	
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTO	<b>DTAL</b> of Receipts This Page (optional)	1		190.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE   130 / 201   (check only one)
Any in or for	nformation copied from such Reports and S commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	AME OF COMMITTEE (In Full) IEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
	ıll Name (Last, First, Middle Initial) S SHANA HART			Date of Receipt
M	ailing Address 4120 JACKSBORO			03 27 2010
Ci		State	Zip Code	Transaction ID: INC.A.78467
FE	NYDER  EC ID number of contributing deral political committee.	C	79549	Amount of Each Receipt this Period  50.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
	ıll Name (Last, First, Middle Initial) R PETER HARTY			Date of Receipt
_	ailing Address 19520 YELLOW WING			03 27 2010
Ci	ty OLORADO SPRINGS	State CO	Zip Code 80908	Transaction ID: INC.A.78239  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C		192.31
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio VP GOV	n ERNMENT AFFAIRS	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	]
	ull Name (Last, First, Middle Initial) R THOMAS HEKKER			Date of Receipt
_	ailing Address 28 WEST THRID STR	EET #1332		03 27 2010
Ci S	ty OUTH ORANGE	State NJ	Zip Code 07079	Transaction ID: INC.A.78728  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	0.010	30.00
N; M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 210.00	
SUB	TOTAL of Receipts This Page (optional)			272.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 201 (check only one)    X
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any personal part of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR SCOTT HELMUS Mailing Address 23 VALLEY RD  City SUCCASUNNA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (crecify)	State Zip Code NJ 07876  C  Occupation VP CLIENT SOLUTIONS  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.78318  Amount of Each Receipt this Period  85.00
Full Name (Last, First, Middle Initial) MR ERIC HESS Mailing Address 10 CARLTON RD  City FLANDERS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General	State Zip Code NJ 07836  C  Occupation VP ENGINEERING & OPS Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.78411  Amount of Each Receipt this Period  60.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON  Mailing Address 16 LUTH TERRACE  City WEST ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07052  C  Occupation	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 27 2010  Transaction ID: INC.A.78533  Amount of Each Receipt this Period  50.00
Receipt For: Primary General Other (specify)	SVP PHARMACY OPS Aggregate Year-to-Date ▼ 350.00	195.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN			Date of Receipt
	Mailing Address 974 HILLCREST ROA	ND .		03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78614
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FACI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)		350.00	
— В.	Full Name (Last, First, Middle Initial) MR ROGER HOLLAND			Date of Receipt
	Mailing Address 41 SAINT RAPHAEL			03 27 YYYY 2010
	City	State	Zip Code	Transaction ID: INC.A.78524
	LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		350.00	
_ С.	Full Name (Last, First, Middle Initial) ELIZABETH HOLLOWAY	_		Date of Receipt
	Mailing Address 9222 RANDLE VALLE	Y DR		03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78869
	CORDOVA	TN	38018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer ACCREDO HEALTH GROUP		ANT GENERAL COUNSEL	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date 🔻	
	Other (specify)		280.00	
T <sub>s</sub>	SUBTOTAL of Receipts This Page (optional)	1	<b>__</b>	140.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 201 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso the name and address of any political committee to	
MEDCO HEALTH SOLUTIONS INC	C. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 5 SUNCLIFF DR		Date of Receipt
City	State Zip Code	0 3 2 7 2 0 1 0 Transaction ID: INC.A.78559
TARRYTOWN	NY 10591	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INTERVENTION DELIVERY SYS	т
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	
Full Name (Last, First, Middle Initial) RITA HOLT		Date of Receipt
Mailing Address 1558 N PISGAH RO		03 / 27 / 2010
City	State Zip Code	Transaction ID: INC.A.78847
CORDOVA	TN 38016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation  VP REIMBURSEMENT	
Receipt For: Primary General	Aggregate Year-to-Date ▼	,
Other (specify)	350.00	
Full Name (Last, First, Middle Initial) MS CYNTHIA HORN		Date of Receipt
Mailing Address 9553 ANDREW DR		03 / 27 / Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.78835
TWINSBURG FEC ID number of contributing	OH 44087	Amount of Each Receipt this Period 50.00
federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CUST SVC	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
CURTOTAL of Descints This Days (astisses	J)	180.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each	rate schedule(s) (check only one)  Summary Page  FOR LINE NUMBER: PAG  (check only one)  X 11a 11b 11c 15	12
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold ig the name and address of any	or used by any person for the purpose of soliciting controlitical committee to solicit contributions from such col	tributions mmittee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL ACTION CO	DMMITTEE (a.k.a. Medco Health PAC)	
Full Name (Last, First, Middle Initial) MR STEVEN HOROWITZ		Date of Receipt	
Mailing Address 4 MELISSA COUR	RT	0 3 / 2 7 / Y	2010
City MONTVILLE	State Zip Coo NJ 07045	e Transaction ID: INC.A.78  Amount of Each Receipt this	
FEC ID number of contributing federal political committee.	C	Allount of Each receipt tills	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS PLA	NNING	
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Dat	350.00	
Full Name (Last, First, Middle Initial) MR BERNARD HUKILL		Date of Receipt	
Mailing Address 17219 CLOVIS		0 3 / D D / Y	2 0 1 0
City HELOTES	State Zip Coo TX 78023	e Transaction ID: INC.A.78  Amount of Each Receipt this	
FEC ID number of contributing federal political committee.	C	Amount of Lach necept this	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM OPS		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Dat	650.00	
Full Name (Last, First, Middle Initial) MR JEFFREY HULL	I	Date of Receipt	
Mailing Address 2616 S 3B'S & K I	RD	0 3 2 7	2 0 1 0
City GALENA	State Zip Coo	e Transaction ID: INC.A.78	538
FEC ID number of contributing federal political committee.	OH 43021	Amount of Each Receipt this	32.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR HLTH CAR	E OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Dat		
	nal)		132.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>∠</b> <b>A</b> .	Full Name (Last, First, Middle Initial) MRS KIMBERLY HUMPHRIES Mailing Address 10010 POINTE COVE City LAKELAND FEC ID number of contributing federal political committee.	State TN	Zip Code 38002	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  Other (specify) ▼		on INESS PLANNING e Year-to-Date ▼ 350.00	]
3.	Full Name (Last, First, Middle Initial) MR DAVID ISRAEL Mailing Address 730 COLUMBUS AVEN	NUE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.78244
	NEW YORK  FEC ID number of contributing federal political committee.	C	10025	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n INESS DEV	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 350.00	
. –	Full Name (Last, First, Middle Initial) MS SUSAN ITO			Date of Receipt
	Mailing Address 6366 SW 90TH STREE	ΞT		03 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.78255
	GAINESVILLE FEC ID number of contributing federal political committee.	C	32608	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR CLINICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
Γ	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>.</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 136 / 201   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS MARIANNE JACKS			Date of Receipt
Mailing Address 329 MORRIS AVEN	IUE		03 27 2010
City	State	Zip Code	Transaction ID: INC.A.78294
MOUNTAIN LAKES  FEC ID number of contributing federal political committee.	NJ C	07046	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n - ACCT EXEC	
Receipt For:  Primary  General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR JASON JAMES			Date of Receipt
Mailing Address RR 2 BOX 2036		03 / 27 / Y Y Y Y	
City CANADENSIS	State PA	Zip Code 18325	Transaction ID: INC.A.78248
FEC ID number of contributing federal political committee.	C	10020	Amount of Each Receipt this Period  35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHY	n 'SICIAN ENGAGEMENT	
Receipt For:  Primary General  Other (specify)	Aggregate	Year-to-Date ▼ 245.00	
Full Name (Last, First, Middle Initial) MR TODD JEFFREY			Date of Receipt
Mailing Address 15 ELIZABETH STF	REET		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City DUMONT	State NJ	Zip Code 07628	Transaction ID: INC.A.78673
FEC ID number of contributing federal political committee.	C	0/626	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHAR	n RM CONTRACT & CONSUL	TING
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	)		135.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 137/201   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) ROBERT JINKS			Date of Receipt
Mailing Address 22 PAGE AVE			03 27 2010
City	State	Zip Code	Transaction ID: INC.A.78308
LYNDHURST	NJ	07071	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS REQUIREMENTS	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		350.00	
Full Name (Last, First, Middle Initial) MRS REGINA JONES			Date of Receipt
Mailing Address POST OFFICE BOX	03 27 2010		
City	State	Zip Code	Transaction ID: INC.A.78410
GERMANTOWN	TN	38183	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP CUS		
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify) ▼		525.00	
Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
Mailing Address 12224 MONTCALM	STREET		03 27 2010
City	State	Zip Code	Transaction ID: INC.A.78616
CARMEL	IN	46032	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		325.00	
SUBTOTAL of Receipts This Page (optional)			150.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 201 (check only one)    X
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any person dress of any political committee to	
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)  MS KATHRYN JONSRUD  Mailing Address 16357 VICTORIA CUR	VE SE		Date of Receipt
	City PRIOR LAKE	State MN	Zip Code 55372	Transaction ID: INC.A.78466  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CLIENT & MKT PROG STRA	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 245.00	
В.	Full Name (Last, First, Middle Initial) MR JOHN KAPIOSKI Mailing Address 8202 MARSH GLEN C	Т		Date of Receipt
	City	State	Zip Code	0 3 2 7 2 0 1 0 Transaction ID: INC.A.78593
	TAMPA FEC ID number of contributing federal political committee.	C	33647	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	PHARMACY COMPLIANCE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
C.	Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE			Date of Receipt
	Mailing Address 995 PINES TERR			03 27 2010
	City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.78356  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP FIN	n ANCIAL & ANALYTICAL SVO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		·····	135.00
	TOTAL This Period (last page this line number of	only)	<b></b>	

	FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III			Date of Receipt
	Mailing Address 1970 WOODLANDS P	Ľ		03 27 27 2010
	City POWELL	State OH	Zip Code 43065	Transaction ID: INC.A.78529  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10000	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio GENERA	n AL MGR GROUP	
	Receipt For:  Primary General  Other (specify)		e Year-to-Date ▼ 350.00	
_ i.	Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER	!		Date of Receipt
	Mailing Address 121 CONKLING TOW	03 / 27 / 2010		
	City CHESTER	State NY	Zip Code 10918	Transaction ID: INC.A.78660  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10010	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n ACCT MGMT	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
_	Full Name (Last, First, Middle Initial) KENNETH KLEPPER			Date of Receipt
•	Mailing Address 295 GLEN PLACE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.78708  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07417	192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio PRES &	n CHIEF OPERATING OFFICI	─ ER
	Receipt For:  Primary General  Other (specify) ▼	. •	e Year-to-Date ▼ 1346.10	
Γ	SUBTOTAL of Receipts This Page (optional)	I		292.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)		on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS KATHLEEN KORDUCKI  Mailing Address 920 CLARK STREET  City  BOWLING GREEN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code OH 43402  C  Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date  350.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MS BARBARA KRZAK  Mailing Address 495 ISLAND WAY  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07417  C  Occupation VP INFO TECHNOLOGY  Aggregate Year-to-Date  385.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y  O 3 2 7 2 0 1 0  Transaction ID: INC.A.78569  Amount of Each Receipt this Period  55.00
Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN Mailing Address 2735 YORK RD  City COLUMBUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code OH 43221  C  Occupation SVP MEMBER SVCS  Aggregate Year-to-Date   350.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.78631  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	155.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 201 (check only one)    X
A or	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements man	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MR MANOJ KUMAR Mailing Address 7 SUNRISE WAY			Date of Receipt
	City	State	Zip Code	0 3 2 7 2 0 1 0  Transaction ID: INC.A.78557
	TOWACO	NJ	07082	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio BUSINES	n SS PROCESS CHAMPION	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
	Full Name (Last, First, Middle Initial) MR MARK LANDY			Date of Receipt
	Mailing Address 18 LADIK PL			03 / 27 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.78564
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SVC	n DELIVERY SYSTEM	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		525.00	
	Full Name (Last, First, Middle Initial) JAMES LANGLEY	<b>'</b>		Date of Receipt
	Mailing Address 10921 MAIN RANGE	TRAIL		03 / 27 / Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.78863
	LITTLETON	CO	80127	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP		IBURSEMENT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Γ,	SUBTOTAL of Receipts This Page (optional)			155.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 142 / 201   (check only one)     X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER			Date of Receipt
	Mailing Address 1100 KIMBERLY COU	RT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.78517
	ROSEVILLE FEC ID number of contributing federal political committee.	CA	95661	Amount of Each Receipt this Period  100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR (	n GOVERNMENT AFFAIRS	
	Receipt For: Primary General Other (specify)	_ '	e Year-to-Date ▼ 700.00	
_	Full Name (Last, First, Middle Initial) JOSEPH LENZ			Date of Receipt
	Mailing Address 1735 LINKENHOLT Co	03 / 27 / 2010		
	City COLLIERVILLE	State TN	Zip Code 38017	Transaction ID: INC.A.78747  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP PERI	n FORMANCE STRATEGY	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
_	Full Name (Last, First, Middle Initial) MR DORIAN LO			Date of Receipt
	Mailing Address 6 CLUBHOUSE ROAD	)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City BLOOMINGDALE	State NJ	Zip Code 07403	Transaction ID: INC.A.78520  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07.100	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		<b>_</b>	200.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16
or fo	information copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.  Full Name (Last, First, Middle Initial)	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
1	MR ROBERT LONG Mailing Address 18 HARLIND TERRA	CE		Date of Receipt  0 3 2 7 2 0 1 0
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.78506  Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		50.00
_	Name of Employer MEDCO HEALTH SOLUTIONS		L ACCT EXEC	
ŀ	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
]	Full Name (Last, First, Middle Initial) DAVID LOSCHINSKEY			Date of Receipt
-	Mailing Address 4500 MT GILLESPIE DR			03 27 2010
	Dity AND	State	Zip Code	Transaction ID: INC.A.78867
F	_AKELAND FEC ID number of contributing ederal political committee.	C	38002	Amount of Each Receipt this Period  50.00
1	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP BIAC		7
F	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
1	Full Name (Last, First, Middle Initial) MR ROSS LUCE Mailing Address 1066 WEST GROVE	СТ		Date of Receipt
-	Dity	State	Zip Code	0 3 2 7 2 0 1 0 Transaction ID: INC.A.78376
	GIBSONIA	PA	15044	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		30.00
_	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	_	
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 390.00	
Ī	BTOTAL of Receipts This Page (optional) .	•		130.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR KENNETH MALLEY			Date of Receipt
	Mailing Address 764 W. SADDLE RIVE	R ROAD		03 27 2010
	City <u>HO HO KUS</u>	State NJ	Zip Code 07423	Transaction ID: INC.A.78412  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n ENERAL MGR	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
– В.	Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO Mailing Address 33 HICKORY TAVERN	I RD		Date of Receipt
				03 27 2010
	City GILLETTE	State NJ	Zip Code 07933	Transaction ID: INC.A.78257  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07300	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA		
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
_ С.	Full Name (Last, First, Middle Initial) LORI MARINO			Date of Receipt
<b>.</b>	Mailing Address 31 UNDERWOOD DRI	IVE		03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78791
	WEST ORANGE  FEC ID number of contributing federal political committee.	NJ C	07052	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST GI	n ENERAL COUNSEL	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 201 (check only one)    X
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL			Date of Receipt
	Mailing Address W144 N7150 TERRA	03 / 27 / Y Y Y Y Y Y		
	City MENOMONEE FALLS	State WI	Zip Code 53051	Transaction ID: INC.A.78443  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30001	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
– В.	Full Name (Last, First, Middle Initial) MR TODD MARTIN			Date of Receipt
	Mailing Address 11825 SHEPPARDS (	03 27 2010		
	City CLARKSVILLE	State MD	Zip Code	Transaction ID: INC.A.78392
	FEC ID number of contributing federal political committee.	C	21029	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	on GENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10	
с. С.	Full Name (Last, First, Middle Initial) MR WILLIAM MARTIN			Date of Receipt
	Mailing Address 2601 FOX HLL CIRCL	03 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.78799  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30139	50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation	on VP BUS DEV	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			292.30
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 201 (check only one)    X   11a
(	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	not be sold or used by any persol ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JEFFREY MAY	A > / =		Date of Receipt
	Mailing Address 137 WASHINGTON A	03 27 2010		
	City	State	Zip Code	Transaction ID: INC.A.78618
	HILLSDALE	NJ	07642	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP DRU	I JG DISTRIB & CONTROL	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼ 1346.10	1
_	Other (specify) ▼	0 0	0 0 0 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE	Date of Receipt		
	Mailing Address 57 MOUNTAINSIDE I	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State		Zip Code	Transaction ID: INC.A.78422
	POMPTON LAKES	NJ	07442	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP SALE	n S AND MARKETING	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	-
	Other (specify)		350.00	
с. С.	Full Name (Last, First, Middle Initial) THOMAS MCCANN			Date of Receipt
	Mailing Address 9600 DOVE SPRING	03 / 27 / Y Y Y Y Y Y Y		
	City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.78875  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.163	50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP SALE		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .	1		292.30
	TOTAL This Period (last page this line numbe		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 201 (check only one)    X   11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH			Date of Receipt
	Mailing Address 87 ROSELAWN RD	03 27 7 2010		
	City HIGHLAND MILLS	State NY	Zip Code 10930	Transaction ID: INC.A.78516  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST GE	n ENERAL COUNSEL	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1344.00	
- В.	Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA			Date of Receipt
	Mailing Address 112 GREEN TERRACE WAY			03 27 4 2010
	City Stat WEST MILFORD NJ		Zip Code 07480	Transaction ID: INC.A.78667  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07400	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUS	n SINESS OPS	7
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.17	
_ C.	Full Name (Last, First, Middle Initial) DAVID MILLER	<u> </u>		Date of Receipt
	Mailing Address 7 CLOVER LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.78266  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07000	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABC	n DR RELATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .	1		434.31
T	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 11		
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
Full Name (Last, First, Middle Initial)	POLITICAL ACTION COMMITTEE (a.k.a.	Medico Health PAC)		
MRS KAREN MILLER  Mailing Address 34 MACKENZIE LAN	E NORTH	Date of Receipt		
City	State Zip Code	0 3 2 7 2 0 1 0 Transaction ID: INC.A.78256		
DENVILLE  FEC ID number of contributing federal political committee.	NJ 07834	Amount of Each Receipt this Period 50.00		
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	Occupation EXEC DIR INTERNAL AUDIT Aggregate Year-to-Date	-		
Primary General Other (specify)	350.00			
Full Name (Last, First, Middle Initial)  PAMELA MILLER	,			
Mailing Address 158 SUMMIT AVENU	03 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City HACKENSACK	State Zip Code NJ 07601	Transaction ID: INC.A.78718  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	55.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SUSTAIN & COMMUNITY INVEST	<del>-</del>   г		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00			
Full Name (Last, First, Middle Initial)  MR DAVID MITCHELL		Date of Receipt		
Mailing Address 222 WEST 14TH STF APT. 4B	Mailing Address 222 WEST 14TH STREET			
City NEW YORK	State Zip Code NY 10011	Transaction ID: INC.A.78745  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING & PRODUCT DEV			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00			
SUBTOTAL of Receipts This Page (optional) .	<b>&gt;</b>	155.00		

SCHEDULE A (FEC Form	ii 3A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 149 / 201   (check only one)     X
Any information copied from such Rep or for commercial purposes, other than	orts and Statements may using the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTION	S INC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial MS JULIANA MOLEK	)		Date of Receipt
Mailing Address 8620 LAKE R	03 27 2010		
City CHANHASSEN	State MN	Zip Code	Transaction ID: INC.A.78400
FEC ID number of contributing federal political committee.	C	55317	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR S	n SPECIAL MARKETS	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial MR THOMAS MORIARTY	)		Date of Receipt
Mailing Address 86 WELLINGTON AVENUE			03 27 2010
City SHORT HILLS	State NJ	Zip Code 07078	Transaction ID: INC.A.78245  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07070	192.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GFNL C-	SEC-SVP PHARM STRAT S	<del></del> 501
Receipt For:  Primary General  Other (specify) ▼	<del>  '</del>	Year-to-Date ▼ 1344.00	
Full Name (Last, First, Middle Initial MS THERESA MORMILE	)		Date of Receipt
	Mailing Address 59 VALLEY VIEW TER		
City MONTVALE	State NJ	Zip Code	0 3 2 7 2 0 1 0 Transaction ID: INC.A.78619
FEC ID number of contributing federal political committee.	C	07645	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL		
Receipt For:  Primary General  Other (specify) ▼	<del>   </del>	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (o	ptional)		292.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 201 (check only one)    X   11a
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person the name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR CRAIG MORRIS  Mailing Address N 49 W 25648 MCKE  City  PEWAUKEE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	·	Date of Receipt    M   M   Z   Z   Z   Z   Z   Z   D   D
Full Name (Last, First, Middle Initial) MR ROBERT MULLER Mailing Address 69 FERN PLACE  City PARAMUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07652  C  Occupation VP HLTH BUS CLIENT ENROLLMNT Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS BECKY NAGLE Mailing Address 64 WALTER AVE  City HASBROUCK HEIGHTS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07604  C  Occupation VP CLINICAL SVCS  Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JANARDHAN NARAYANAN Mailing Address 32 BLACKSTONE [ City PRINCETON FEC ID number of contributing federal political committee.	State Zip Code NJ 08540	Date of Receipt  M M / D D / Y Y Y Y Y Y  O 3 / 2 7 / 2 0 1 0  Transaction ID: INC.A.78803  Amount of Each Receipt this Period  29.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR MARKET STRATEGY  Aggregate Year-to-Date   253.00	
Full Name (Last, First, Middle Initial) MR MICHAEL NICODEMO Mailing Address 407 MEER AVE City	State Zip Code	Date of Receipt  0 3 / 2 7 / 2 0 1 0  Transaction ID: INC.A.78666
WYCKOFF  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	NJ 07481  C Occupation	Amount of Each Receipt this Period  50.00
Receipt For: Primary General Other (specify)	VP INFO TECHNOLOGY  Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial) MS ARLENE NOLAN Mailing Address 319 BOGERT AVE	NUE	Date of Receipt  0 3 2 7 2 0 1 0
City RIDGEWOOD  FEC ID number of contributing federal political committee.	State Zip Code NJ 07450	Transaction ID: INC.A.78363  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP FINANCE  Aggregate Year-to-Date   350.00	
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	129.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each	parate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 152 / 201 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and address of any	political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR HAIK NOVSHADIAN  Mailing Address 45 DAVIS ROAD			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SPARTA FEC ID number of contributing	State Zip Co NJ 07871		Transaction ID: INC.A.78446  Amount of Each Receipt this Period  38.00
Receipt For:  Primary  Other (specify) ▼	Occupation DIR CLINICAL THI Aggregate Year-to-Da		
Full Name (Last, First, Middle Initial) DENISE O'CALLAGHAN  Mailing Address 4 HIGHLAND AVE P.O. BOX 408			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PEAPACK  FEC ID number of contributing federal political committee.	State Zip Co NJ 07977		Transaction ID: INC.A.78796  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  Other (specify) ▼	Occupation VP OPS Aggregate Year-to-Da	ate ▼ 350.00	
Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER Mailing Address 6 PARK DR SOUT	H		Date of Receipt
City RYE FEC ID number of contributing federal political committee.	State Zip Co NY 10580		Transaction ID: INC.A.78650  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP COO		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	350.00	
SUBTOTAL of Receipts This Page (option	al)		138.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR MELVIN OHL			Date of Receipt
	Mailing Address 274 E FRANKLIN TP	03 27 4 2010		
	City RIDGEWOOD	State NJ	Zip Code	Transaction ID: INC.A.78590
	FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	on CUREMENT & INVENTORY	_
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- В.	Full Name (Last, First, Middle Initial) MRS SUE OLIVER			Date of Receipt
	Mailing Address 11 LEE DRIVE	03 27 2010		
	City	State	Zip Code	Transaction ID: INC.A.78600
	NORTH HALEDON  FEC ID number of contributing federal political committee.	NJ C	07508	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	IR TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
с. С.	Full Name (Last, First, Middle Initial) MS LUDIVINA PACAMARRA			Date of Receipt
	Mailing Address 4 TEAK COURT			03 27 YYYY 03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78577
	RINGWOOD  FEC ID number of contributing federal political committee.	C	07456	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	IR TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			150.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154 / 201 (check only one)    X   11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS DAWN PAGANO Mailing Address 185 PASCACK ROAL  City PARK RIDGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 07656  C  Occupation GROUP COO  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 2 7 2 0 1 0  Transaction ID: INC.A.78576  Amount of Each Receipt this Period  50.00
Other (specify)  Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE Mailing Address 12 MILLBROOK COU	300.00	Date of Receipt
City  LIVINGSTON  FEC ID number of contributing federal political committee.	State Zip Code NJ 07039	Transaction ID: INC.A.78468  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP RETIREE SOLUTIONS MKTG Aggregate Year-to-Date  350.00	
Full Name (Last, First, Middle Initial) MR MATTHEW PATELLA Mailing Address 30 TAM O SHANTEF	DRIVE	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  MAHWAH  FEC ID number of contributing federal political committee.	State Zip Code NJ 07430	Transaction ID: INC.A.78302  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date ▼	
Other (specify)   SUBTOTAL of Receipts This Page (optional)	350.00	150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	(1)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 201 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and addr	ess of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MRS CATHY PATTEN  Mailing Address 2001 MEADOWS A  City  LANTANA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State TX  C Occupation VP/GM	Zip Code 76226 Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.78532  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS Mailing Address 2780 FOLKSTONE  City COLUMBUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State OH C Occupation VP/GM	Zip Code 43220  ✓ear-to-Date ▼ 325.00	Date of Receipt  M M / D D / Y Y Y Y Y  O 3
Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI Mailing Address 211 WILTSIE COUF  City WYCKOFF  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupation VP INFO	Zip Code 07481 FECHNOLOGY Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3
SUBTOTAL of Receipts This Page (optional	)		80.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156 / 201 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MERRI PENDERGRASS, MD  Mailing Address 3201 QUEENSBURY  City COLLEYVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Y WAY WEST  State TX  C  Occupation VP NATIO	Zip Code 76034	Date of Receipt  M M Z 7 Z 7 Z 0 1 0  Transaction ID: INC.A.78815  Amount of Each Receipt this Period  50.00
Other (specify)  Full Name (Last, First, Middle Initial) MR VICTOR PERINI Mailing Address 9304 GROVE PARK  City GERMANTOWN	COVE State TN	350.00 Zip Code 38139	Date of Receipt    M M M
FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation VP TRC Aggregate	Year-to-Date ▼ 350.00	50.00
Full Name (Last, First, Middle Initial) JIMMY PERREN Mailing Address 1250 BRAY PARK D			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COLLIERVILLE FEC ID number of contributing federal political committee.	State TN	Zip Code 38017	Transaction ID: INC.A.78841  Amount of Each Receipt this Period  75.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary  General  Other (specify) ▼	<del></del>	JLATORY COMPLIANCE Year-to-Date ▼ 525.00	
SUBTOTAL of Receipts This Page (optional)			175.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule( for each category of the Detailed Summary Page	(Check only one)	
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any ng the name and address of any political commi	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.  (a.k.a. Medco Health PAC)	
Full Name (Last, First, Middle Initial)  MR THOMAS PETTYES  Mailing Address 8522 UPLAND LN	I NORTH	Date of Receipt    M	
City  MAPLE GROVE  FEC ID number of contributing	State Zip Code MN 55311	Transaction ID: INC.A.78386  Amount of Each Receipt this Period	
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	50.00	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.0	0	
Full Name (Last, First, Middle Initial) MR THOMAS PIERCE Mailing Address 10297 E. LAKE D	, , ,		
City	State Zip Code	0 3 2 7 2 0 1 0  Transaction ID: INC.A.78773	
ENGLEWOOD	CO 80111	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABOR RELATIONS		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.0	0	
Full Name (Last, First, Middle Initial) MS JUDITH PLATKIN	-	Date of Receipt	
Mailing Address 29 BLACKWELL	AVE	03 27 2010	
City	State Zip Code	Transaction ID: INC.A.78259	
MORRISTOWN  FEC ID number of contributing federal political committee.	NJ 07960	Amount of Each Receipt this Period 192.30	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1346.1	0 ,	
SUBTOTAL of Receipts This Page (option	nal)	292.30	

Any information copied from such Reports and		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR NEIL PREZIOSO  Mailing Address 10258 WINDSOR W  City POWELL  FEC ID number of contributing federal political committee.	State OH	Zip Code 43065	Date of Receipt    M M
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼		T CARE OPS/FORMULARY  Year-to-Date ▼  350.00	/CDP
Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE Mailing Address 875 ALEXANDRIA C			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.78491
FEC ID number of contributing federal political committee.	NJ C	07446	Amount of Each Receipt this Period  192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP HR	1	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 1346.10	
Full Name (Last, First, Middle Initial) MR JASON PROULX	-		Date of Receipt
Mailing Address 3601 LEANNE DRIV	E		0 3 2 7 2 0 1 0
City FLOWER MOUND	State TX	Zip Code 75022	Transaction ID: INC.A.78698
FEC ID number of contributing federal political committee.	C	73022	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n PLANNING	
Receipt For:  Primary General  Other (specify) ▼	<del>-                                    </del>	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)			292.30

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 201 (check only one)    X			
,	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
Ì	` '	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M					
Α.	Full Name (Last, First, Middle Initial) MR MARK PROULX	Date of Receipt					
	Mailing Address 20 BRANDY RIDGE R		03 27 2010				
	City	State	Zip Code	Transaction ID: INC.A.78691			
	<u>SPARTA</u>	NJ	07871	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			192.31			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF C	on DF OPERATIONS				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	]			
— В.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES	1		Date of Receipt			
	Mailing Address 800 SANDY TRAIL  City State			0 3 2 7 2 0 1 0  Transaction ID: INC.A.78716			
			Zip Code				
	KELLER FEC ID number of contributing federal political committee.	C	76248	Amount of Each Receipt this Period  25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	on	7			
	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date ▼ 325.00				
_ С.	Full Name (Last, First, Middle Initial) MS FRANCES RAO	1		Date of Receipt			
	Mailing Address 19 ROSS ROAD			03 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City SCARSDALE	State NY	Zip Code 10583	Transaction ID: INC.A.78295			
	FEC ID number of contributing federal political committee.	C	10363	Amount of Each Receipt this Period  75.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR REGULATORY				
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 525.00				
	SUBTOTAL of Receipts This Page (optional)			292.31			
ı	TOTAL This Period (last page this line number		<u> </u>				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Δ.	Full Name (Last, First, Middle Initial) MRS MONICA REED	Date of Receipt		
	Mailing Address 8475 DUNHAM STATI		03 27 2010	
	City Sta		Zip Code	Transaction ID: INC.A.78485
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- В.	Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS			Date of Receipt
	Mailing Address 204 TOKENEKE RD  City State			03 / 27 / 2010
			Zip Code	Transaction ID: INC.A.78405
	DARIEN FEC ID number of contributing federal political committee.	CT	06820	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BIAC		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- С.	Full Name (Last, First, Middle Initial) MR VICTOR RENNA			Date of Receipt
	Mailing Address 8 CARLA ANN CT			03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78654
	FLANDERS  FEC ID number of contributing federal political committee.	C	07836	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	on CUREMENT & INVENTORY	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any per he name and address of any political committee  POLITICAL ACTION COMMITTEE (a.k.	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS  Mailing Address 412 RIVER MEWS L  City EDGEWATER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07020  C  Occupation EXEC DIR TECHNOLOGY  Aggregate Year-to-Date  490.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: INC.A.78713  Amount of Each Receipt this Period  70.00
Full Name (Last, First, Middle Initial) ELIZABETH RITCHIE Mailing Address 27 DAY RD  City PLEASANT VALLEY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code CT 06063  C  Occupation SR DIR BUSINESS DEVELOPMEN Aggregate Year-to-Date  350.00	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO  Mailing Address 855 CLUB MOSS CT  City MARIETTA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	T.  State Zip Code GA 30068  C  Occupation PRESIDENT SYSTEMED  Aggregate Year-to-Date ▼  1346.10	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.78403  Amount of Each Receipt this Period  192.30
SUBTOTAL of Receipts This Page (optional)		312.30

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
2	MEDCO HEALTH SOLUTIONS INC. F Full Name (Last, First, Middle Initial)	POLITICAL /	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۸.	MS DONNA ROSEN  Mailing Address 7 RED OAK LANE			Date of Receipt  O 3
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.78608  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP OPS-	n -CLINICAL TECH	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
3.	Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS Mailing Address 72027 RAMOTH DRIVE			Date of Receipt
	Mailing Address 7227 RAMOTH DRIVE	7'- 0 - 1-	03 27 2010	
	City State JACKSONVILLE FL		Zip Code 32226	Transaction ID: INC.A.78366  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n IR FORMULARY CONSULTI	NG
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) MR RICHARD RUBINO Mailing Address 3 APACHE DRIVE			Date of Receipt
	City	State	Zip Code	0 3 2 7 2 0 1 0  Transaction ID: INC.A.78604
	<u>OAKLAND</u>	NJ	07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		193.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP FIN	n ANCE & CHIEF FIN OFFCR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1351.00	
S	UBTOTAL of Receipts This Page (optional)			293.00
т	OTAL This Period (last page this line number	only)	<b>&gt;</b>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 201 (check only one)    X   11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK	Date of Receipt		
	Mailing Address 21 SKY TOP RIDGE			03 27 27 2010
	City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.78428
	FEC ID number of contributing federal political committee.	C	07436	Amount of Each Receipt this Period  50.00
	Name of Employer ACCREDO HEALTH GROUP	Name of Employer ACCREDO HEALTH GROUP  VP CLIN		
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) MS KATHERYN RUSSI Mailing Address 5965 VILLAGE CIRCL	Date of Receipt		
		.C		03 27 2010
	City JOHNSTON	State IA	Zip Code 50131	Transaction ID: INC.A.78310  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		30101	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		IR CLINICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
С.	Full Name (Last, First, Middle Initial) MR ANTHONY RUSSO			Date of Receipt
	Mailing Address 66 FINCH RD			03 27 2010
	City RINGWOOD	State NJ	Zip Code	Transaction ID: INC.A.78549
	FEC ID number of contributing federal political committee.	C	07456	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO		
	Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
İ	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JULIANA RUTH	Date of Receipt		
	Mailing Address 1 UNDERCLIFF TERR		7: 0 1	03 / 27 / 2010
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.78825  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS DEVELOPMENT	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
- 3.	Full Name (Last, First, Middle Initial) MR JESSE RUZICKA			Date of Receipt
	Mailing Address 334 MORRIS AVE			03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78735
	BOONTON	NJ	07005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio NATL AC	n DCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
- ).	Full Name (Last, First, Middle Initial) MS MARY RYAN			Date of Receipt
	Mailing Address 456 RICHMOND AVENUE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MAPLEWOOD	State NJ	Zip Code 07040	Transaction ID: INC.A.78597  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		78.34
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PHAI	n RMACY REGULATORY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 470.04	
	SUBTOTAL of Receipts This Page (optional)			158.34
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 165 / 201 (check only one)    X
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS IN  Full Name (Last, First, Middle Initial)	C. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
MR MATTHEW SARDY  Mailing Address 230 FAIRFIELD AV	VE.	Date of Receipt  0 3 2 7 2 0 1 0
City RIDGEWOOD	State Zip Code NJ 07450	Transaction ID: INC.A.78345
FEC ID number of contributing federal political committee.	NJ 07450	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR DAVID SCHLETT		Date of Receipt
Mailing Address 339 GRAMERCY F		03 / 27 / 2010
City GLEN ROCK	State Zip Code NJ 07452	Transaction ID: INC.A.78603  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCIAL & ANALYTICAL SV	 c
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ		Date of Receipt
Mailing Address 9111 N KARLOV		03 27 2010
City SKOKIE	State Zip Code IL 60076	Transaction ID: INC.A.78336  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	al)	150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 166 / 201 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
4	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) BRUCE SCOTT  Mailing Address 18650 BEARPATH TF	Date of Receipt		
	Walling Address   10000 BEARPATH TE	03 27 2010		
	City	State	Zip Code	Transaction ID: INC.A.78814
	EDEN PRAIRIE	MN	55347	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	FEC ID number of contributing federal political committee.		192.31
	Name of Employer ACCREDO HEALTH GROUP  PRESID			
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1346.17	
— В.	Full Name (Last, First, Middle Initial) MS CYNTHIA SCOTT			Date of Receipt
	Mailing Address 18650 BEARPATH TRAIL			03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78263
	EDEN PRAIRIE	MN	55437	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ICAL PROG DEV	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)	0 0	350.00	
с. С.	Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT	•		Date of Receipt
	Mailing Address 7330 EVEREST LANE - NORTH			03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78656
	MAPLE GROVE	MN	55311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		L ACCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date ▼	-
	Primary General Other (specify) ▼		350.00	
	SUBTOTAL of Receipts This Page (optional) .			292.31
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 167 / 201 (check only one)    X   11a
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statement statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS MONICA SCOZZARE  Mailing Address 3021 E MILLCREE	C. POLITICAL ACTION COMMITTEE (a.k.a	Date of Receipt  0 3 2 7 2 0 1 0
City SALT LAKE CITY FEC ID number of contributing	State Zip Code UT 84109	Transaction ID: INC.A.78253  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date ▼	50.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV  Mailing Address 66 PROSPECT AV	350.00 E	Date of Receipt  0 3 2 7 2 0 1 0
City WESTWOOD FEC ID number of contributing federal political committee.	State Zip Code NJ 07675	Transaction ID: INC.A.78679  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP BUSINESS DEV  Aggregate Year-to-Date   350.00	
Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CRE	EK AVE	Date of Receipt
City  LAS VEGAS  FEC ID number of contributing federal political committee.	State Zip Code NV 89148	Transaction ID: INC.A.78514  Amount of Each Receipt this Period  60.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ONCOLOGY TRC OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  780.00	
SUBTOTAL of Receipts This Page (optional	l)	160.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one)   X   11a		
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
۷.	Full Name (Last, First, Middle Initial) MR JOHN SHEA			Date of Receipt		
••		Mailing Address 62 FRANKLIN TURNPIKE				
	City	State	Zip Code	0 3 2 7 2 0 1 0 Transaction ID: INC.A.78275		
	ALLENDALE  FEC ID number of contributing federal political committee.	NJ C	07401	Amount of Each Receipt this Period 40.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST Co				
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 280.00			
- 3.	Full Name (Last, First, Middle Initial) MR FRANK SHEEHY			Date of Receipt		
	Mailing Address 119 HAMILTON RD	03 / 27 / Y Y Y Y				
	City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.78355  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		07400	192.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n BENERAL MGR			
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1344.00			
	Full Name (Last, First, Middle Initial) DAWN SHERMAN			Date of Receipt		
•	Mailing Address 63 BRAMSHILL DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.78784		
	FEC ID number of contributing federal political committee.	C	0/430	Amount of Each Receipt this Period  50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP & CC	n OO INTL STRATEGY & OPS			
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00			
ſ	SUBTOTAL of Receipts This Page (optional)	1		282.00		
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		•	282.00		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 169 / 201 (check only one)    X   11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR PETER SHERMAN Mailing Address 139 GATES AVENUE			Date of Receipt
				03 27 2010
	City	State NJ	Zip Code	Transaction ID: INC.A.78246
	MONTCLAIR  FEC ID number of contributing federal political committee.	C	07042	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MANAG	on ING COUNSEL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) JEFFREY SIMEK			Date of Receipt
	Mailing Address 3555 GRANDE TUSC	03 27 2010		
	City	State	Zip Code	Transaction ID: INC.A.78482
	NEW SMYRNA BEACH	<u>FL</u>	32168	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS		P COMMUNICATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregati	e Year-to-Date ▼ 1228.86	
с. С.	Full Name (Last, First, Middle Initial) MR LEE SIMON			Date of Receipt
	Mailing Address 2390 GREENVIEW R	OAD		03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78662
	NORTHBROOK  FEC ID number of contributing federal political committee.	C	60062	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			175.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 170 / 201 (check only one)    X   11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persible name and address of any political committee to .  POLITICAL ACTION COMMITTEE (a.k.a)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JEFFREY SINKO Mailing Address 10 CHERRY TREE  City KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07405  C  Occupation ASST GENERAL COUNSEL Aggregate Year-to-Date  300.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO Mailing Address 564 DALE COURT E  City RIVER VALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07675  C  Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date  210.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR BRADLEY SKATTER Mailing Address 6433 FRANKLIN HII  City INDEPENDENCE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code MN 55359  C  Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date  350.00	Date of Receipt  M M M Z D D Z Z Z D 1 D  Transaction ID: INC.A.78281  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional	· ·	130.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 171 / 201 (check only one)    X
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ROBERT SMITH Mailing Address 40, IOSHILA DR. T.			Date of Receipt
	Mailing Address 40 JOSHUA DR T			03 27 2010
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.78629  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR Mailing Address 23 CEDAR GATE RO	AD		Date of Receipt
				03 27 2010
	City DARIEN	State CT	Zip Code 06820	Transaction ID: INC.A.78700  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHAIRM	on IAN & CEO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
с. С.	Full Name (Last, First, Middle Initial) MR ALAN SOKALER			Date of Receipt
	Mailing Address 30 MICHELLE WAY			03 27 2010
	City PINE BROOK	State NJ	Zip Code 07058	Transaction ID: INC.A.78736  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.000	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			292.31
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEITEMIZED RECEITEMIZED RECEITEM	PTS  a such Reports and Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any person	FOR LINE NUMBER: PAGE 172 / 201 (check only one)  X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
or for commercial purposes  NAME OF COMMITTEE	, other than using the name and ad	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, M MS JENNIFER SPIDLE Mailing Address 6108			Date of Receipt
		7. 0. 1	03 27 2010
City COLLEYVILLE	State TX	Zip Code 76034	Transaction ID: INC.A.78543  Amount of Each Receipt this Period
FEC ID number of contri federal political committee	buting	70004	25.00
Name of Employer MEDCO HEALTH SOL	UTIONS Occupation VP/GM	n	
Receipt For:  Primary  Other (specify) ▼	Aggregate Aggregate	e Year-to-Date ▼ 325.00	
Full Name (Last, First, N PETER STARK	liddle Initial)		Date of Receipt
Mailing Address 4840	COLE ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38117	Transaction ID: INC.A.78868  Amount of Each Receipt this Period
FEC ID number of contri federal political committee	buting		50.00
Name of Employer ACCREDO HEALTH G	ROUP Occupation GROUP	n VP MANUF SVCS	
Receipt For: Primary Other (specify)	General	e Year-to-Date ▼ 350.00	
Full Name (Last, First, MMR CHRISTOPHER STA			Date of Receipt
Mailing Address 7 FC	REST LAKE DR		03 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WEST HARRISON	State NY	Zip Code	Transaction ID: INC.A.78605
FEC ID number of contri federal political committee	buting	10604	Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOL	UTIONS Occupation SVP FIN	n IANCIAL & ANALYTICAL SV	c
Receipt For: Primary Other (specify)	Aggregate Aggregate	e Year-to-Date ▼ 1346.17	
SUBTOTAL of Receipts T	his Page (optional)		267.31

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)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial)  MS JILL STEARNS  Mailing Address 13130 HALSELL DR  City State Zip Code TX 78732  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR CRAIG STEEL  Mailing Address 122 DEMAREST AVENUE  City State Zip Code Aggregate Year-to-Date ▼  FEC ID number of contributing federal political committee.  City State Zip Code Transaction ID: INC.A.78393  Amount of Each Receipt Transaction ID: INC.A.78393  Amount of Each Receipt For: Primary General Other (specify) ▼  NJ 07630  FEC ID number of contributing federal political committee.  Cupation SR NATL ACCT EXEC  Receipt For: Primary General Other (specify) ▼  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)			_	
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)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  A. MS JILL STEARINS  Melling Address 13130 HALSELL DR  City State Zip Code TX 78732  Transaction ID: INC.A.78665  Amount of Each Receipt Ibis Period  FEC ID number of contributing federal political committee.  Pull Name (Last, First, Middle Initial)  Mid CrNa6 STEEL  Maling Address 122 DEMAREST AVENUE  City State Zip Code Type State Zip Code Type State State Zip Code Type State Sta		,	for each category of the	(check only one)  X 11a 11b 11c 12
NAME OF COMMITTEE (in Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  A. A. Maing Address 13130 HALSELL DR  City State Zip Code TX 78732  FEC ID number of contributing federal political committee.  Augment of Engloyer Manco HEALTH SOLUTIONS  B. MATL ACCT EXEC  Receipt For: Primary General Other (specify) ▼ State Zip Code Augment of Each Receipt this Period  FEC ID number of contributing federal political committee.  C. Aggregate Year-to-Date ▼ Date of Receipt  Date of Receipt  Transaction ID: INC. A. 78365  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code Augment of Each Receipt this Period  FEC ID number of contributing federal political committee.  C. Name of Engloyer Augment of Engloyer State Zip Code Name of Engloyer Augment of Engloyer State Zip Code Name of Engloyer Augment of Engloyer State Zip Code Name of Engloyer Augment of Engloyer State Zip Code Name of Engloyer Augment of Engloyer State Zip Code Name of Engloyer Augment of Engloyer State Zip Code Name (Last, First, Middle Initial)  NS ANY STENNELINER  Mailing Address 728 GULF BOULEVARD COP BOX 834  City State Zip Code INDIAN ROCKS BEACH FL 33785  FEC ID number of contributing federal political committee.  C. Name of Engloyer Augment of Each Receipt this Period  FEC ID number of Committee.  C. Name of Engloyer Augment of Each Receipt this Period  Transaction ID: INC. A. 78444  Amount of Each Receipt this Period  Transaction ID: INC. A. 78444  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Engloyer Augment of Each Receipt this Period  Transaction ID: INC. A. 78444  Amount of Each Receipt this Period  Transaction ID: INC. A. 78444  Amount of Each Receipt this Period  Transaction ID: INC. A. 78444  Amount of Each Receipt this Period  FEC ID number of Committee.  Order (Specify) ▼ Augment of Each Receipt this Period  Transaction ID: INC. A. 78444  Amount of Each Receipt this Period  Transac		Any information copied from such Reports and State	ments may not be sold or used by any perso	n for the purpose of soliciting contributions
A. MS_JILL_STEARNS  Mailing Address 13130 HALSELL DR  City  AUSTIN  FEC ID number of contributing federal political committee.  Name of Employer Amount of Each Receipt Units Period  FEC ID number of contributing SR NATL ACCT EXEC  Receipt For:  Primary General Other (specity) ▼  State Zip Code  Anount of Each Receipt this Period  FEU IN Ame (Last, First, Middle Initial)  B. MIC CLANG STEEL  Mailing Address 122 DEMAREST AVENUE  City  State Zip Code  NJ 07830  Transaction ID: INC. A. 78393  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A. 78393  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A. 78393  Amount of Each Receipt this Period  Transaction ID: INC. A. 78393  Amount of Each Receipt this Period  EMERSON  FEC ID number of contributing federal political committee.  Name of Employer MEDO HEALTH SOLUTIONS  Receipt For:  Other (specity) ▼  State Zip Code  NJ 07830  Amount of Each Receipt this Period  FUR DO HEALTH SOLUTIONS  SR NATL ACCT EXEC  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  MS AMY STENKELLNER  Mailing Address 728 GULF BOULEVARD  CIV PO BOX 834  City  State Zip Code  Transaction ID: INC. A. 78444  Amount of Each Receipt this Period  Transaction ID: INC. A. 78444  Amount of Each Receipt Initial)  Transaction ID: INC. A. 78444  Amount of Each Receipt Initial)  NS AMY STENKELLNER  MEDO HEALTH SOLUTIONS  FUR INDIAN ROCKS BEACH  FL 33785  FEC ID number of contributing federal political committee.  Occupation  VP NATIONAL PRACTICE LEADER  Receipt For:  Primary General  Other (specity) ▼  Apgregate Year-to-Date ▼  PNATIONAL PRACTICE LEADER  Aggregate Year-to-Date ▼  Other (specity) ▼  Apgregate Year-to-Date ▼  Apgregate Ye		NAME OF COMMITTEE (In Full)		
City AUSTIN TX 78732  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  FUII Name (Last, First, Middle Initial) MAR CRAG STEEL  Malling Address 122 DEMAREST AVENUE  City State Zip Code MEDCO HEALTH SOLUTIONS  B. MATL ACCT EXEC  Receipt For: Primary General Other (specify) ▼  State Zip Code MARC STEEL  Malling Address 122 DEMAREST AVENUE  City State Zip Code MEDCO HEALTH SOLUTIONS  Coccupation SR NATL ACCT EXEC  Receipt For: Primary General Other (specify) ▼  State Zip Code MEDCO HEALTH SOLUTIONS  Coccupation SR NATL ACCT EXEC  Receipt For: Primary General Other (specify) ▼  State Zip Code Manare of Employer MEDCO HEALTH SOLUTIONS  Coccupation SR NATL ACCT EXEC  Receipt For: Primary General Other (specify) ▼  State Zip Code INDIAN ROCKS BEACH FL 33785  FEC ID number of contributing federal political committee.  C Same of Employer MEDCO HEALTH SOLUTIONS  C Same	∠ <b>A.</b>	MS JILL STEARNS		<b>'</b>
AUSTIN TX 78732  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  RECEIPT FOR: Primary		Mailing Address 13130 HALSELL DR		
Solution		•	•	Transaction ID: INC.A.78665
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		AUSTIN	TX 78732	Amount of Each Receipt this Period
Receipt For:			C	50.00
Primary General Other (specify) ▼ 350.00    Post of Receipt		Name of Employer MEDCO HEALTH SOLUTIONS	•	
MRI CRAIG STEEL  Mailing Address 122 DEMAREST AVENUE  City State Zip Code EMERSON NJ 07630  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Full Name (Last, First, Middle Initial) MS AMY STEINKELLNER  Mailing Address 728 GULF BOULEVARD C/O PO BOX 834  City State Zip Code INDIAN ROCKS BEACH FL 33785  FEC ID number of contributing federal political committee.  Name of Employer Mailing Address 728 GULF BOULEVARD C/O PO BOX 834  City State Zip Code INDIAN ROCKS BEACH FL 33785  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: PC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼		Primary General	1 1 1 1 1 1 1 1 1	
City State Zip Code NJ 07630  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  CITY State Zip Code NJ 07630  Cocupation SR NATL ACCT EXEC  Aggregate Year-to-Date ▼  Pull Name (Last, First, Middle Initial) MS AMY STEINKELLNER  Mailing Address 728 GULF BOULEVARD C/O PO BOX 834  City State Zip Code FL 33785  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Occupation VP NATIONAL PRACTICE LEADER  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  150.00	- В.			Date of Receipt
EMERSON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Name of Employer Mailing Address 728 GULF BOULEVARD C/O PO BOX 834  City  NIDIAN ROCKS BEACH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Occupation  VP NATIONAL PRACTICE LEADER  Amount of Each Receipt this Period  50.00  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  Transaction ID: INC.A.78444  Transaction		Mailing Address 122 DEMAREST AVENUE		
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS AMY STEINKELLNER  Mailing Address 728 GULF BOULEVARD C/O PO BOX 834  City State Zip Code INDIAN ROCKS BEACH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Occupation VP NATIONAL PRACTICE LEADER  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  350.00		•	•	
Name of Employer   MEDCO HEALTH SOLUTIONS   Occupation   SR NATL ACCT EXEC			NJ 07630	Amount of Each Receipt this Period
Receipt For:    Primary			C	50.00
Primary General Other (specify) ▼  State Zip Code INDIAN ROCKS BEACH FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  State Zip Code FL 33785  Coccupation VP NATIONAL PRACTICE LEADER  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  150.00		MEDOO HE'NI TH COLLITIONS	•	
C. Full Name (Last, First, Middle Initial)  MS AMY STEINKELLNER  Mailing Address 728 GULF BOULEVARD C/O PO BOX 834  City State Zip Code INDIAN ROCKS BEACH FL 33785  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  150.00			Aggregate Year-to-Date ▼	
C. MS AMY STEINKELLNER  Mailing Address 728 GULF BOULEVARD  C/O PO BOX 834  City State Zip Code INDIAN ROCKS BEACH FL 33785  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt Transaction ID: INC.A.78444  Amount of Each Receipt this Period  C 50.00			350.00	
C/O PO BOX 834  City  INDIAN ROCKS BEACH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  Other (specify) ▼  State Zip Code FL 33785  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  50.00  Transaction ID: INC.A.78444  Amount of Each Receipt this Period  50.00	- С.			Date of Receipt
INDIAN ROCKS BEACH FL 33785  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  150.00				
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  350.00				
Receipt For: Primary General Other (specify)			C	50.00
Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  350.00		Name of Employer MEDCO HEALTH SOLUTIONS	•	
SUBTOTAL of Receipts This Page (optional)		Primary General		
		SUBTOTAL of Receipts This Page (optional)		150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 201 (check only one)    X
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<b>∠</b> <b>A</b> .	Full Name (Last, First, Middle Initial) DR GLEN STETTIN Mailing Address 8 MILL GLEN CT  City UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	State NJ	Zip Code 07458	Date of Receipt  M M / D D / Y Y Y Y Y  O 3 2 7 2 0 1 0  Transaction ID: INC.A.78684  Amount of Each Receipt this Period  192.31
_	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼		n ADVANCED CLINICAL SLT e Year-to-Date ▼ 1346.17	NS
В.	Full Name (Last, First, Middle Initial) MR GERARD STOCKER, JR Mailing Address 80 ALGONQUIN TRL  City OAKLAND FEC ID number of contributing	State NJ	Zip Code 07436	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  □ Primary □ General □ Other (specify) ▼	+ +	n _ ACCT EXEC • Year-to-Date ▼	50.00
С.	Full Name (Last, First, Middle Initial) MR SCOTT STRATTON Mailing Address 351 TIMBERLANE DF	RIVE		Date of Receipt  0 3 2 7 2 0 1 0
	City ORANGE  FEC ID number of contributing federal political committee.	State CT	Zip Code 06477	Transaction ID: INC.A.78744  Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>- '</del>	DUCT DEVELOPMENT  Year-to-Date   350.00	
	SUBTOTAL of Receipts This Page (optional) .		<b>)</b>	292.31
	TOTAL This Period (last page this line number	only)	<b>)</b>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	fo	se separate schedule(s) or each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 175 / 201 (check only one)    X		
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC					
Full Name (Last, First, Middle Initial)  MS SUZANNE STREDNAK  Mailing Address 157 WATCHUNG D	R		Date of Receipt  0 3 2 7 2 0 1 0		
City	State	Zip Code	Transaction ID: INC.A.78341		
HAWTHORNE	NJ	07506	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLIN				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial)  MILAYNA SUBAR, MD	<u> </u>		Date of Receipt		
#8CE	#8CE				
City		Zip Code	Transaction ID: INC.A.78813		
NEW YORK	NY	10023	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		30.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATIONA	AL PRACTICE LEADER			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 210.00			
Full Name (Last, First, Middle Initial) MR MARK SULLIVAN			Date of Receipt		
Mailing Address 16025 PINE VALE F	PL.		03 / 27 / Y Y Y Y Y Y		
City MIDLOTHIAN	State VA	Zip Code 23113	Transaction ID: INC.A.78272  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS F	PROCESS SPECIALIST			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 350.00			
SUBTOTAL of Receipts This Page (optional	)		130.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 176 / 201 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any peen ame and address of any political committee POLITICAL ACTION COMMITTEE (a.k.)	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS IRENE SUTTON  Mailing Address 20 AVENUE @ PORT APT 209  City WEST NEW YORK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 27 2010  Transaction ID: INC.A.78359  Amount of Each Receipt this Period  40.00
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT Mailing Address 8362 GOLDEN PRAIF  City TAMPA  FEC ID number of contributing federal political committee.		Date of Receipt  M M M / D D / Y Y Y Y Y  0 3 2 7 2 0 1 0  Transaction ID: INC.A.78402  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP/GM  Aggregate Year-to-Date   650.00	
Full Name (Last, First, Middle Initial) NICOLETTE TAPAY Mailing Address 1338 KENYON ST. N  City WASHINGTON	.W. State Zip Code DC 20010	Date of Receipt    M M M
FEC ID number of contributing federal political committee.	C 20010	60.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  Other (specify)   Other	Occupation DIR GOV AFFAIRS  Aggregate Year-to-Date   420.00	
SUBTOTAL of Receipts This Page (optional) .	1	150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 177 / 201 (check only one)    X   11a
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MARY THORSBY	:. POLITICAL ACTION COMMITTEE (a.k.:	a. Medco Health PAC)  Date of Receipt
Mailing Address 17326 ELLEN DR	State Zip Code	0 3 2 7 2 0 1 0  Transaction ID: INC.A.78423
LIVONIA	MI 48152	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN		Date of Receipt
Mailing Address 838 COLONIAL RD	03 / 27 / 2010	
City	State Zip Code	Transaction ID: INC.A.78287
FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENEFIT SYSTEMS SUPPORT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER	1	Date of Receipt
Mailing Address 713 INDIAN CREEK	( RD	03 / 27 / 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
City AMHERST	State Zip Code VA 24521	Transaction ID: INC.A.78519  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR GOVERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  540.00	
SUBTOTAL of Receipts This Page (optional		245.00

SCHEDULE A	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NU (check only or X 11a	
Any information copied or for commercial purp	d from such Reports and States	atements may name and add	v not be sold or used by any perso dress of any political committee to	on for the purpose	e of soliciting contributions
NAME OF COMMI MEDCO HEALT	` '	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Healt	h PAC)
Full Name (Last, F				Date of Re	<u>'</u>
Mailing Address  City	16 FIELDHEDGE DRIV	E State	Zip Code	03	27 2010 Don ID: INC.A.78671
HILLSBOROUG	iH	NJ	08844		Each Receipt this Period
FEC ID number of federal political con		C			30.00
Name of Employer MEDCO HEALTH	SOLUTIONS	Occupation DIR CLIE	n ENT SVC DELIVERY		
Receipt For: Primary Other (specif	General y) ▼	Aggregate	Year-to-Date ▼ 210.00		
Full Name (Last, F	rst, Middle Initial)			Date of Re	eceipt
Mailing Address	273 STEVES LN	03	27 2010		
City		State	Zip Code		on ID: INC.A.78474
FRANKLIN LAK		NJ	07417	Amount of	Each Receipt this Period
FEC ID number of federal political con	nmittee.	C			50.00
Name of Employer MEDCO HEALTH	SOLUTIONS	Occupation VP SAFE			
Receipt For:		Aggregate	Year-to-Date ▼		
Primary Other (specif	General y) <b>▼</b>	0 0	350.00		
Full Name (Last, F				Date of Re	eceipt
Mailing Address	37 KNOLL TERRACE			0 3	27 Y Y Y Y Y Y Y Y
City		State	Zip Code		on ID: INC.A.78476
HAZLET FEC ID number of federal political con		C	07730	Amount of	Each Receipt this Period 30.77
Name of Employer MEDCO HEALTH	SOLUTIONS	Occupation SR DIR 1	n FECHNOLOGY		
Receipt For:	General	Aggregate	Year-to-Date ▼	1	
Other (specif			215.39		
SUBTOTAL of Recei	pts This Page (optional)				110.77
TOTAL This Period	last page this line number o	nly)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 201 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements made name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) JEFF ULANET			Date of Receipt
Mailing Address 8803 BELMART RD  City	Stata	7in Codo	0 3 27 20 10
POTOMAC	State MD	Zip Code 20854	Transaction ID: INC.A.78823
FEC ID number of contributing federal political committee.	C	20034	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio VP BUS	n DEV - ONCOLOGY	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 250.00	1
Other (specify) ▼  Full Name (Last, First, Middle Initial)	0 0		
MRS JENNIFER UTTERDYKE  Mailing Address 1881 GREENTREE F	ROAD		Date of Receipt
City	State	Zip Code	0 3 2 7 2 0 1 0 Transaction ID: INC.A.78373
LEBANON	OH	45036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR MED	n DICATION SAFETY/QUALIT	Y
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) MS CARA VAN ZILE	1		Date of Receipt
Mailing Address 31 LINCOLN RD			03 / 27 / 2010
City	State	Zip Code	Transaction ID: INC.A.78415
KINNELON	NJ	07405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n IR ANALYTICAL SVCS	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	1		125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	· <b>A</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 180 / 201   (check only one)		
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA			Date of Receipt		
Mailing Address W328 S4230 SPR	Mailing Address W328 S4230 SPRING RIDGE				
City WAUKESHA	State WI	Zip Code 53189	Transaction ID: INC.A.78836  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		192.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1344.00			
Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS			Date of Receipt		
Mailing Address 105 ARRANDALE	0 3 27 2 0 1 0				
City ROCKVILLE CENTRE	State NY	Zip Code 11570	Transaction ID: INC.A.78512		
FEC ID number of contributing federal political committee.	C	11370	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTI				
Receipt For: Primary General Other (specify)		Year-to-Date ▼			
Full Name (Last, First, Middle Initial) MR WIL VELARDE			Date of Receipt		
Mailing Address 443 WEST SADD	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.78357  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	07450	30.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 1	ECHNOLOGY			
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 210.00			
SUBTOTAL of Receipts This Page (option	nal)		272.00		

		nary Page       X   11a     11b     11c     12     15     16     1
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and address of any politic	ed by any person for the purpose of soliciting contributions al committee to solicit contributions from such committee.  ITTEE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MR DANIEL WALDEN  Mailing Address 450 BEECHMONT	DR	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  NEW ROCHELLE  FEC ID number of contributing	State Zip Code NY 10804	Transaction ID: INC.A.78579  Amount of Each Receipt this Period  192.31
Receipt For:  Primary  Other (specify)  General  General	Occupation SVP REGULATORY & M Aggregate Year-to-Date	
Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE Mailing Address 5445 GOODWIN A	VENUE	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.78726
DALLAS FEC ID number of contributing federal political committee.	TX 75206	Amount of Each Receipt this Period  192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES SEGMENT L	EADER
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	1346.17
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE		Date of Receipt
Mailing Address 5 APPLE ORCHAR	עא ט	03 7 27 2010
City MOORESTOWN	State Zip Code NJ 08057	Transaction ID: INC.A.78527  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	650.00
	1	434.62

SAN CLEMENTE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MRS KELLY WEBBER  Mailing Address 107 UPPER SADDLE RIVER  City S  MONTVALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  OCCUPATIONS	and address of any political committee  ICAL ACTION COMMITTEE (a.  Itate Zip Code CA 92673  Cupation P NATL ACCTS  Igregate Year-to-Date  R ROAD  Itate Zip Code IJ 07645	ee to solicit contributions from such committee.
MS CATHERINE WASSON  Mailing Address 3912 CALLE ANDALUCIA  City SAN CLEMENTE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Ag Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MRS KELLY WEBBER  Mailing Address 107 UPPER SADDLE RIVER  City SMONTVALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Contribution of Contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Ag Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) LOWELL WEINER	CA 92673  Cupation C	Transaction ID: INC.A.78290  Amount of Each Receipt this Period  Date of Receipt  M M M / D D / Y Y Y Y Y  0 3 27 2010  Transaction ID: INC.A.78501  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)  MRS KELLY WEBBER  Mailing Address 107 UPPER SADDLE RIVER  City S  MONTVALE N  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Ag  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  LOWELL WEINER	R ROAD State Zip Code  JJ 07645	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify)  Full Name (Last, First, Middle Initial) LOWELL WEINER	cupation  CORP HR  gregate Year-to-Date ▼	
City S WESTFIELD N  FEC ID number of contributing federal political committee.	700.00  State Zip Code JJ 07090	Date of Receipt  O 3
MEDCO HEALTH SOLUTIONS VP	cupation  CORP COMMUNICATIONS  gregate Year-to-Date  350.00	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 183 / 201 (check only one)    X
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)  MR TIMOTHY WENTWORTH  Mailing Address 309 WATERVIEW DF			Date of Receipt
	Maining Address 309 WATERVIEW Dr	1		03 27 4 2010
	City	State	Zip Code	Transaction ID: INC.A.78383
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	on PRES EMPLOYER GROUF	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
- В.	Full Name (Last, First, Middle Initial) MR KENNETH WERMES			Date of Receipt
	Mailing Address 26037 N WRANGLEF	RD		03 27 2010
	City	State	Zip Code	Transaction ID: INC.A.78488
	SCOTTSDALE	AZ	85255	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
с. С.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON			Date of Receipt
	Mailing Address 2 TIFFANY ROAD			03 27 YYYY 2010
	City	State	Zip Code	Transaction ID: INC.A.78457
	MORRISTOWN  FEC ID number of contributing federal political committee.	C	07960	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKT		
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			342.31
ŀ	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 184 / 201 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN Mailing Address 145 WAUGHAW RC  City TOWACO FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State NJ C Occupation SVP FIN.	Zip Code 07082  n ANCIAL & ANALYTICAL SVO	Date of Receipt  M M Z 7 Z 0 1 0  Transaction ID: INC.A.78396  Amount of Each Receipt this Period  50.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH Mailing Address 43 AZALEA PLACE		350.00	Date of Receipt
City  PISCATAWAY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State NJ C Occupation SR DIR F Aggregate		Transaction ID: INC.A.78288  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) BRENDA WRIGHT Mailing Address 1834 HUNTERS CR  City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State TN C Occupation VP QUAI	Zip Code 38138  n LITY INTEGRITY HEALTH Year-to-Date ▼ 350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.78854  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)	)	·····	130.00

A.

PAGE 185 / 201 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 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) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR Date of Receipt Mailing Address 219 SPOOK ROCK RD. 03 27 2010 City State Zip Code Transaction ID: INC.A.78558 **SUFFERN** NY 10901 Amount of Each Receipt this Period FEC ID number of contributing 50.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation **SVP & CHIEF INFO OFFICER** Receipt For: Aggregate Year-to-Date Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) В. MR JAMES ZIRPOLI Date of Receipt Mailing Address 6691 DEERVIEW DRIVE 0 3 27 2010 City State Zip Code Transaction ID: INC.A.78441 **LOVELAND** OH 45140 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM Receipt For: Aggregate Year-to-Date ▼ Primary General

SUBTOTAL of Receipts This Page (optional)	•	75.00
TOTAL This Period (last page this line number only)	<u></u>	46926.81

325.00

Other (specify)

A.

В.

Office Sought:

State:

House

Senate

District:

President

Disbursement For:

Primary

Other (specify)

### **SCHEDULE B (FEC Form 3X)**

FOR LINE NUMBER: PAGE 186 / 201 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 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) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) Transaction ID: EXP.B.76897 BANK OF MARIN Date of Disbursement 0 1 0 3 2010 Mailing Address 50 MADERA BLVD. City State Zip Code Amount of Each Disbursement this Period **CORTE MADERA** CA 94925 18.55 Purpose of Disbursement **TAXES** 001 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: EXP.B.76898 FRANCHISE TAX BOARD Date of Disbursement 0 1 0 3 2010 Mailing Address 9645 BUTTERFIELD WAY City Zip Code State Amount of Each Disbursement this Period SACRAMENTO 94257-0501 CA 14.00 Purpose of Disbursement TAXES 001 Candidate Name Category/ Туре

General

SUBTOTAL of Disbursements This Page (optional)	•	32.55
TOTAL This Period (last page this line number only)		32.55

	D (FEC FOIIII )	y Use sep	arate schedule(s)	(check or	E NUMBER: nlv one)	PAGE 187 / 201
	ISBURSEMEN	Detailed	category of the Summary Page	21b 27	22 X 23 28a 28b	24 25 2 28c 29
or for commercial pr	ied from such Reports urposes, other than usin MITTEE (In Full)					
/ MEDCO HEA	LTH SOLUTIONS I	NC. POLITICAL AC	CTION COMMIT	ΓΤΕΕ (a.k.a.	Medco Health PAC	5)
•	, First, Middle Initial) CHWARTZ FOR CO	NGRESS			Transaction ID:  Date of Disbursen	nent
Mailing Address	P.O. BOX 2232				03 7 0 1	
City JENKINTOW	N	State PA	Zip Code 19046		Amount of Each D	Disbursement this Perio
Purpose of Disb				011		1000.00
Candidate Name ALLYSON Y.	SCHWARTZ			Category/ Type		
Office Sought:	X House Senate President	Disbursement For:  X Primary Other (spe	2010 General ecify)			
State: PA	District: 13 , First, Middle Initial)					
•	CALIFORNIA INC				Transaction ID: Date of Disbursen	nent
Mailing Address	455 CAPITOL N	MALL, SUITE 801			03 / 01	2010
City SACRAMENT	 -O	State CA	Zip Code 95814		Amount of Each D	isbursement this Perio
Purpose of Disb	oursement			011	<u> </u>	5000.00
Candidate Name				Category/ Type		
Office Sought:	House X Senate President	Disbursement For:  X Primary Other (spe	2010 General			
State: CA	District: , First, Middle Initial)					
COMMITTEE	FOR HISPANIC CA PAC (CHC BOLD PA	AUSES/BUILDING AC)	OUR LEADERS	SHIP	Transaction ID:  Date of Disbursen	nent
Mailing Address	1831 BAY STR	EET SE			03 7 0 1	Ž Ž O Ĭ O Š
City WASHINGTO	N	State DC	Zip Code 20003		Amount of Each D	isbursement this Perio
Purpose of Disb	ursement			011		5000.00
Candidate Name GENERAL PL	PRPOSE COMMITT	EE		Category/ Type		
Office Sought:	House Senate President	Disbursement For: Primary Other (spe	General ecify) ▼			
0	District:					
State:		•				

ITEMIZED			arate schedule(s)	FOR LINE	
	DISBURSEMENT	for each	category of the Summary Page	(check only	7 one)  22
					or the purpose of soliciting contributions licit contributions from such committee
NAME OF C	OMMITTEE (In Full) EALTH SOLUTIONS INC				
,	ast, First, Middle Initial) IP FOR CONGRESS 20	10			Transaction ID: EXP.B.76889 Date of Disbursement
Mailing Addr	ess 5915 EASTMAN	AVENUE, SUITE	100		$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 0 & 1 & \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} \end{bmatrix}$
City MIDLAND		State MI	Zip Code 48640		Amount of Each Disbursement this Period
Purpose of D				011	5000.00
Candidate Na DAVID LEE	ECAMP	<u></u>	0040	Category/ Type	
Office Sough	x House Senate President District: 04	Disbursement For:  X Primary  Other (spe	2010 General ecify) ▼		
Full Name (L	ast, First, Middle Initial) Y COMMITTEE				Transaction ID: EXP.B.76893 Date of Disbursement
Mailing Addr	ess P.O. BOX 1000				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ & 2 & 0 & 1 & O \end{smallmatrix} \end{bmatrix}$
City DES MOIN	ES	State IA	Zip Code 50304		Amount of Each Disbursement this Perio
Purpose of D	isbursement			011	1000.00
Candidate Na				Category/ Type	
	E. GRASSLEY				
CHARLES Office Sough	House X Senate President	Disbursement For:  X Primary Other (spe	2010 General	,,	
CHARLES Office Sough State: IA Full Name (L	t: House  X Senate  President  District:  ast, First, Middle Initial)	X Primary Other (spe	General	,	Transaction ID: EXP.B.76894 Date of Disbursement
Office Sough State: IA Full Name (L	nt:    House   X Senate   President   District:   ast, First, Middle Initial)   KOWSKI FOR US SENA	X Primary Other (spe	General	,	Transaction ID: EXP.B.76894 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CHARLES Office Sough State: IA Full Name (L LISA MUR	tt: House	X Primary Other (spe	General	7	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
State: IA  Full Name (L LISA MURI  Mailing Addre  City ANCHORA  Purpose of D	tt: House  X Senate President District:  ast, First, Middle Initial)  KOWSKI FOR US SENA  P.O. BOX 100847	X Primary Other (spe	General ecify) ▼  Zip Code	011	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
State: IA  Full Name (L LISA MURI  Mailing Addre	ast, First, Middle Initial)  KOWSKI FOR US SENA  PROBLEM 100847  AGE  Disbursement	X Primary Other (spe	General ecify) ▼  Zip Code		Date of Disbursement  M 3 M / D D D / Y Y Y O Y O  Amount of Each Disbursement this Period
CHARLES Office Sough State: IA Full Name (L LISA MURI Mailing Addra City ANCHORA Purpose of E Candidate Na	tt: House  X Senate  President  District:  ast, First, Middle Initial)  KOWSKI FOR US SENA  P.O. BOX 100847  GE  Disbursement  District:  ast, First, Middle Initial)	X Primary Other (spe	General ecify)   Zip Code 99510  2010  General	011 Category/	Date of Disbursement  M 3 M / D D D / Y Y Y O Y O  Amount of Each Disbursement this Period

Transaction ID: EXP.B.76895  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 to solicit contributions from	SCHEDULE B (FEC Form 3X)	Use sep	arate schedule(s)	FOR LINE	
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)  MEDICO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medico Health PAC)  Full Name (Last, First, Middle Initial)  VOLUNTEERS FOR SHIMKUS  Mailing Address PO BOX 5458  City SPRINGFIELD  Candidate Name JOHN M. SHIMKUS  Office Sought: X House Senate President  State: IL District: 19  Full Name (Last, First, Middle Initial)  WHITFIELD FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 391  Transaction ID: EXP.B.76888 Date of Disbursement in 1000.00  Transaction ID:	TEMIZED DISBURSEMENTS	for each	category of the '	21b	22 X 23 24 25
NAME OF COMMITTEE (in Full)  MEDOCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medoc Health PAC)  Full Name (Last, First, Middle Initial)  VOLUNTEERS FOR SHIMKUS  Mailing Address PO BOX 5458  City State Zip Code IL 62705  Purpose of Disbursement  Candidate Name JOHN M. SHIMKUS  Office Sought: X House Senate President State: IL District: 19  Full Name (Last, First, Middle Initial)  Candidate Name Address P.O. BOX 391  City State: IZ District: 19  Full Name (Last, First, Middle Initial)  Candidate Name President State: XY District: 01  Full Name (Last, First, Middle Initial)  Candidate Name President State: XY District: 01  Full Name (Last, First, Middle Initial)  Candidate Name President State: XY District: 01  Full Name (Last, First, Middle Initial)  Candidate Name President State: XY District: 01  Full Name (Last, First, Middle Initial)  Contribution A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)  Mailing Address S915 EASTMAN AVENUE, SUITE 100  City Middle Name President State: Xip Code Mil 48640  Purpose of Disbursement  Candidate Name President State: Xip Code Mil 48640  Purpose of Disbursement  City Middle Initial)  Contribution A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)  City Middle Name President State: Xip Code Mil 48640  Purpose of Disbursement  Candidate Name President State: Xip Code Mil 48640  Purpose of Disbursement  Candidate Name President State: Xip Code Mil 48640  Purpose of Disbursement  Candidate Name President State: Xip Code Mil 48640  Office Sought: House Senate President President President State: Xip Code Mil 48640  Office Sought: House President					
Mailing Address PO BOX 5458	NAME OF COMMITTEE (In Full)				
Mailing Address   PO BOX 5458	,				Date of Disbursement
SPRINGFIELD IL 62705  Purpose of Disbursement  Candidate Name JOHN M. SHIMKUS  Office Sought: X House Senate President State: IL District: 19  Full Name (Last, First, Middle Initial)  WHITFIELD FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 391  City State Zip Code KY 42241  Purpose of Disbursement  Candidate Name ED WHITFIELD  Office Sought: X House Senate President State: KY District: 01  Full Name (Last, First, Middle Initial)  Office Sought: X House Senate President State: KY District: 01  Full Name (Last, First, Middle Initial)  CCONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)  Mailing Address 5915 EASTMAN AVENUE, SUITE 100  City State Zip Code MIDLAND MI 48640  Candidate Name LEADERSHIP PAC  Office Sought: House Senate Primary General  Other (specify) ▼  Amount of Each Disbursement this Period Disbursement (Transaction ID: EXP.B.78207  Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Period Disbursement (Transaction ID: EXP.B.78207  Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Period Disbursement (Transaction ID: EXP.B.78207  Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Period Disbursement (Transaction ID: EXP.B.78207  Date of Disbursement  Other (specify) ▼	Mailing Address PO BOX 5458				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
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JOHN M. SHIMKUS  Office Sought:					1000.00
Senate Priesident State: IL District: 19  Full Name (Last, First, Middle Initial) WHITFIELD FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 391  City State Zip Code KY 42241  Purpose of Disbursement  Candidate Name ED WHITFIELD  Office Sought: X House Priesident State: KY District: 01  Full Name (Last, First, Middle Initial) CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)  Mailing Address 5915 EASTMAN AVENUE, SUITE 100  City State Zip Code MI 48640  Purpose of Disbursement  City State Zip Code MI 48640  Purpose of Disbursement  City State Zip Code MI 48640  Purpose of Disbursement  City State Zip Code MI 48640  Purpose of Disbursement  City State Zip Code MI 48640  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement Candidate Name LEADERSHIP PAC  Office Sought: House Primary General Other (specify) ▼  Disbursement For: Disbursemen	JOHN M. SHIMKUS			0,	
Full Name (Last, First, Middle Initial) WHITFIELD FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 391  City State Zip Code HOPKINSVILLE KY 42241 Purpose of Disbursement  Candidate Name ED WHITFIELD  Office Sought: X House President Senate President  State: KY District: 01  Full Name (Last, First, Middle Initial) CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)  City State Zip Code (CAMPAC)  Mailing Address 5915 EASTMAN AVENUE, SUITE 100  City State Zip Code MI AB640  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Disbursement For: Senate Primary General Category/ Type  Disbursement For: 2010  Amount of Each Disbursement Into Periode Amount of Each Disbursement this Periode Amount of Each Disbursement Type  Office Sought: President Disbursement For: Senate Primary General Other (specify) ▼	Senate President	Primary	X General		
City HOPKINSVILLE KY 42241  Purpose of Disbursement  Candidate Name ED WHITFIELD  Office Sought: X House Senate President State: KY District: 01  Full Name (Last, First, Middle Initial) CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)  Mailing Address 5915 EASTMAN AVENUE, SUITE 100  City State Zip Code MIDLAND MI 48640  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Senate Primary General Other (specify) ▼  Amount of Each Disbursement this Permitted Part of Each Disbursement Par	Full Name (Last, First, Middle Initial)	ГТЕЕ			
HOPKINSVILLE  Purpose of Disbursement  Candidate Name ED WHITFIELD  Office Sought:  X House President State: KY District: 01  Full Name (Last, First, Middle Initial) CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)  Mailing Address  5915 EASTMAN AVENUE, SUITE 100  City MilDLAND Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought:  House President  Disbursement For:  Senate Primary General  Other (specify)  Transaction ID: EXP.B.78207  Date of Disbursement  011  Category/ Type  Amount of Each Disbursement this Per  Amount of Each Disbursement this Per  1011  Category/ Type  Office Sought:  House Primary General Other (specify)  Other (specify)  Other (specify)  Transaction ID: EXP.B.78207  Date of Disbursement  011  Category/ Type  Other (specify)	Mailing Address P.O. BOX 391				$\begin{bmatrix}\begin{smallmatrix}M&M&M\\0&3\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\0&1\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}$
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ED WHITFIELD  Office Sought:	Purpose of Disbursement			011	1000.00
Senate President Other (specify) ▼  State: KY District: 01  Full Name (Last, First, Middle Initial) CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)  Mailing Address 5915 EASTMAN AVENUE, SUITE 100  City State Zip Code MIDLAND MI 48640  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Senate President Other (specify) ▼  Other (specify) ▼  Transaction ID: EXP.B.78207  Date of Disbursement   Amount of Each Disbursement this Period Category/ Type  Other (specify) ▼					
Full Name (Last, First, Middle Initial)  CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)  Mailing Address 5915 EASTMAN AVENUE, SUITE 100  City State Zip Code MIDLAND MI 48640  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Senate Primary General Other (specify) Total Part of Disbursement For:  Senate Primary General Other (specify) Total Part of Disbursement Date of Disbursement  Transaction ID: EXP.B.78207  Date of Disbursement  M 3 M / P 2 5 / Y 2 0 1 0  Amount of Each Disbursement this Period Part of Disbursement For:  Senate Primary General Other (specify) Total Part of Date of Disbursement  Odd	Senate President	X Primary	General		
City State Zip Code MIDLAND MI 48640  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Senate Primary General President  President  State Zip Code MIDLAND  Category/ Type  Amount of Each Disbursement this Period.  Category/ Type  Other (specify) ▼	,	TION COMI	MITTEE (CAM	PAC)	
MIDLAND  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought:  House Senate Primary President  Disbursement For: Senate Primary General Other (specify)  Type	Mailing Address 5915 EASTMAN AVEN	IUE, SUITE	100		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} $
Candidate Name LEADERSHIP PAC  Office Sought:  House Senate Primary Primary Other (specify)  Other (specify)					Amount of Each Disbursement this Perio
LEADERSHIP PAC  Office Sought:  Senate President  Disbursement For:  Primary General Other (specify)  ▼	· 				2500.00
Senate Primary General President Other (specify) ▼	LEADERSHIP PAC				
	Senate	Primary			
	State: District:		•		

Transaction ID: EXP.B.78209 Date of Disbursement  City BRENTWOOD BRENTWOOD BRENTWOOD BRENTWOOD BRENTWOOD STAN 37024  Purpose of Disbursement  Candidate Name JAMES H.S. COOPER  Office Sought:  X House JAMES H.S. COOPER  Office Sought:  X House JAMES H.S. COOPER  Office Sought:  X House JAMES H.S. COOPER  Office Sought:  State: TN District: 05  Full Name (Last, First, Middle Initial) Cother (specify)  Transaction ID: EXP.B.78211  Disbursement For:  Q10  Q11  Category/ Type  Other (specify)  Transaction ID: EXP.B.78211  Date of Disbursement  Mailing Address  710 9TH STREET SE	CHEDULE B (FEC Form 3X)	Use separate schedule(s	1	NUMBER: PAGE 190 / 201
or for commercial purposes, other than using the name and address of any political committee to solicil contributions from such committee NAME OF COMMITTEE (in Full)  NAME OF COMMITTEE (in	EMIZED DISBURSEMENTS	for each category of the	21b	22 X 23 24 25 2
NAME OF COMMITTEE (in Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial) CoOPER FOR CONGRESS  Mailing Address P.O. BOX 927  City BRENTWOOD TN 37024  Purpose of Disbursement  Candidate Name JH McDERMOTT  Mailing Address 710 9TH STREET SE  City WASHINGTON Purpose of Disbursement  Candidate Name JH McDERMOTT  Candidate Name JH McDERMOTT  Office Sought: X House Senate President State: WA District: 05  Full Name (Last, First, Middle Initial) Candidate Name JH McDERMOTT  Office Sought: X House Senate President State: WA District: 05  City HARRISONVILLE MO 64701  Purpose of Disbursement  Other (specify) ▼  Transaction ID: EXP.B.78211 Date of Disbursement this Periox  Transaction ID: EXP.B.78211 Date of Disbursement  Other (specify) ▼  Transaction ID: EXP.B.78211 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78211 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78211 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement This Periox  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement  Other (specify) ▼  Transaction ID: EXP.B.78212 Date of Disbursement  Other (specify) ▼				
Mailing Address P.O. BOX 927  City State Zip Code BRENTWOOD TN 37024  Purpose of Disbursement  Candidate Name JAMES H.S. COOPER  Office Sought: X House President  City State Zip Code Disbursement  Other (specify) ▼  Transaction ID: EXP.B.78211  Date of Disbursement this Period Type  Other (specify) ▼  Transaction ID: EXP.B.78211  Date of Disbursement this Period Type  Other (specify) ▼  Amount of Each Disbursement this Period Type  Other (specify) ▼  Transaction ID: EXP.B.78211  Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Period Type  Other (specify) ▼  Amount of Each Disbursement this Period Type  Other (specify) ▼  Transaction ID: EXP.B.78211  Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Period Type  Other (specify) ▼  Transaction ID: EXP.B.78212  Date of Disbursement this Period Type  Other (specify) ▼  Transaction ID: EXP.B.78212  Date of Disbursement this Period Type  Other (specify) ▼  Transaction ID: EXP.B.78212  Date of Disbursement this Period Type  Other (specify) ▼  Transaction ID: EXP.B.78212  Date of Disbursement this Period Type  Other (specify) ▼  Amount of Each Disbursement this Period Type  Other (specify) ▼  Transaction ID: EXP.B.78212  Date of Disbursement this Period Type  Other (specify) ▼  Amount of Each Disbursement this Period Type  Other (specify) ▼  Amount of Each Disbursement this Period Type  Other (specify) ▼  Other (specify) ▼  Amount of Each Disbursement this Period Type  Other (specify) ▼  Amount of Each Disbursement this Period Type  Other (specify) ▼	NAME OF COMMITTEE (In Full)			
City State Zip Code TN 37024  Purpose of Disbursement  Gandidate Name JIM MCDERMOTT  Office Sought: X House WASHINGTON DC 20003  Purpose of Disbursement  City Senate President State: WA District: 07  Full Name (Last, First, Middle Initial)  Candidate Name JIM MCDERMOTT  Office Sought: X House Disbursement For: 2010  Candidate Name JIM MCDERMOTT  Office Sought: X House Disbursement  Candidate Name JIM MCDERMOTT  Office Sought: X House Disbursement For: 2010  X Primary General Disbursement  Candidate Name JIM MCDERMOTT  Office Sought: X House Disbursement For: 2010  X Primary General Disbursement Disbursement For: 2010  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  IKE SKELTON FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX A  City State Zip Code HARRISONVILLE MO 64701  Purpose of Disbursement  Candidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 07  Full Name (Last, First, Middle Initial)  Cardidate Name JIM District: 0	•			Date of Disbursement
BRENTWOOD  Purpose of Disbursement  Candidate Name JAMES H.S. COOPER  Office Sought:	Mailing Address P.O. BOX 927			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & I & O \end{smallmatrix} \end{bmatrix}$
Candidate Name JAMES H.S. COOPER  Office Sought:				Amount of Each Disbursement this Period
JAMES H.S. COOPER  Office Sought:				1000.00
Senate President  State: TN District: 05  Full Name (Last, First, Middle Initial) FRIENDS OF JIM MCDERMOTT  Mailing Address 710 9TH STREET SE  City WASHINGTON DC 20003  Purpose of Disbursement  Candidate Name JIM MCDERMOTT  Office Sought: X House President State: WA District: 07  Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX A  City State Zip Code Amount of Each Disbursement this Period Code (A701)  Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX A  City HARRISONVILLE State Zip Code HARRISONVILLE MO 64701  Candidate Name IKE SKELTON  Office Sought: X House Senate President Senate President Senate President Senate President Senate President State: MO District: 04  Disbursement For: 2010  Candidate Name IKE SKELTON  Office Sought: X House Senate President Senate President Other (specify) ▼  Amount of Each Disbursement Into Each Disbursement this Period Disbursement For: 2010  Candidate Name IKE SKELTON  Office Sought: X House Senate President Other (specify) ▼  State: MO District: 04	JAMES H.S. COOPER	rement For: 2010		
Full Name (Last, First, Middle Initial) FRIENDS OF JIM MCDERMOTT  Mailing Address 710 9TH STREET SE  City WASHINGTON DC 20003  Purpose of Disbursement  Candidate Name JIM MCDERMOTT  Office Sought: X House Senate President State: WA District: 07  Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX A  City HARRISONVILLE Mo 64701  Purpose of Disbursement  Candidate Name IKE SKELTON  Office Sought: X House Senate Mo 64701  Purpose of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Period  Transaction ID: EXP.B.78212 Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Period  Transaction ID: EXP.B.78212 Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Period  Other (specify) ▼  Other (specify) ▼  State: MO District: 04	Senate President	C Primary General		
City WASHINGTON DC 20003  Purpose of Disbursement  Candidate Name  JIM MCDERMOTT  Office Sought:	Full Name (Last, First, Middle Initial)			
WASHINGTON  DC 20003  Purpose of Disbursement  Candidate Name JIM MCDERMOTT  Office Sought:	Mailing Address 710 9TH STREET SE			$\begin{bmatrix}\begin{smallmatrix}M\\03\end{smallmatrix}\end{bmatrix}^M  \begin{smallmatrix}D\\25\end{smallmatrix}  \begin{smallmatrix}D\\25\end{smallmatrix}  \begin{smallmatrix}Y\\2010\end{smallmatrix}$
Candidate Name JIM MCDERMOTT  Office Sought:	•			Amount of Each Disbursement this Period
JIM MCDERMOTT  Office Sought:				2000.00
Senate President Other (specify) ▼  Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX A  City State Zip Code HARRISONVILLE MO 64701  Purpose of Disbursement  Candidate Name IKE SKELTON  Office Sought: X House Senate President State: MO District: 04  State: MO District: 04  X Primary General Other (specify) ▼  Transaction ID: EXP.B.78212  Date of Disbursement  M 3 M / D 2 D / Y 2 0 1 0 Y  Amount of Each Disbursement this Period 1000.00			, ,	
Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX A  City State Zip Code HARRISONVILLE MO 64701  Purpose of Disbursement  Candidate Name IKE SKELTON  Office Sought: X House Senate President State: MO District: 04  Transaction ID: EXP.B.78212  Date of Disbursement  MM M	Senate President	C Primary General		
City	Full Name (Last, First, Middle Initial)	ITTEE		Date of Disbursement
HARRISONVILLE  Purpose of Disbursement  Candidate Name IKE SKELTON  Office Sought:  X House President  State: MO  Disbursement For:  Senate President  Other (specify)   Tage 2010  X Primary  General  Other (specify)  Tage 2020	Mailing Address P.O. BOX A			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & 2 \end{smallmatrix} \end{bmatrix} \ 0 \ \ Y$
Candidate Name IKE SKELTON  Office Sought:  X House Senate President President State: MO  District: 04  Disbursement For:  X Primary General Other (specify)  Type				
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	ISBURSEMENTS	for each	category of the Summary Page	(check only 21b 27	7 one)  22
					or the purpose of soliciting contributions licit contributions from such committee
NAME OF COM	MMITTEE (In Full) ALTH SOLUTIONS INC.				
•	t, First, Middle Initial) FOR CONGRESS INC.				Transaction ID: EXP.B.78213 Date of Disbursement
Mailing Address	P.O. BOX 640				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ Z & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & 1 & O \end{smallmatrix} \end{bmatrix}$
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City ALEXANDRIA	Α	State VA	Zip Code 22306		Amount of Each Disbursement this Period
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Purpose of Dist	ne e			011 Category/ Type	
Candidate Nam LEADERSHII Office Sought:	P PAC  House Senate President	sbursement For: Primary Other (sp	General ecify) ▼	Category/	
Candidate Nam LEADERSHII Office Sought: State: Full Name (Las	P PAC House Dis	Primary		Category/	Transaction ID: EXP.B.78216 Date of Disbursement
Candidate Nam LEADERSHII Office Sought: State: Full Name (Las	P PAC  House Senate President District: t, First, Middle Initial) R PATTY MURRAY	Primary		Category/	Transaction ID: EXP.B.78216
Candidate Nam LEADERSHII Office Sought: State: Full Name (Las PEOPLE FO	P PAC  House Senate President District: t, First, Middle Initial) R PATTY MURRAY	Primary		Category/	Transaction ID: EXP.B.78216 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Nam LEADERSHII Office Sought: State: Full Name (Las PEOPLE FOI Mailing Address	House Dis Senate President District: t, First, Middle Initial) R PATTY MURRAY S P.O. BOX 3662	Primary Other (sp	ecify) ▼ Zip Code	Category/	Transaction ID: EXP.B.78216 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Nam LEADERSHII Office Sought:  State: Full Name (Las PEOPLE FO) Mailing Address  City SEATTLE	House Senate President District: t, First, Middle Initial) R PATTY MURRAY S P.O. BOX 3662  Dursement  RAY	Other (sp.	ecify) ▼ Zip Code	Category/ Type	Transaction ID: EXP.B.78216 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Candidate Nam LEADERSHII Office Sought:  State: Full Name (Las PEOPLE FO) Mailing Address  City SEATTLE Purpose of Dist	House Senate President District: t, First, Middle Initial) R PATTY MURRAY S P.O. BOX 3662  Dursement  RAY	Primary Other (sp	Zip Code 98124	Category/ Type  011 Category/	Transaction ID: EXP.B.78216 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE B (FEC FOIIII 3X)	Use separate so		FOR LINE (check only	
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Any Information copied from such Reports and Stat or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL ACTION	COMMITTE	EE (a.k.a. N	Medco Health PAC)
Full Name (Last, First, Middle Initial) SEARCHLIGHT LEADERSHIP FUND				Transaction ID: EXP.B.78215 Date of Disbursement
Mailing Address 607 14TH ST. NW, SL	JITE 800			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City WASHINGTON	State Zip C DC 200			Amount of Each Disbursement this Period
Purpose of Disbursement			011	5000.00
Candidate Name LEADERSHIP PAC		c	ategory/ Type	
Office Sought: House Disbu Senate President State: District:	rsement For: Primary Other (specify)	General		
Full Name (Last, First, Middle Initial) WASSERMAN-SCHULTZ FOR CONGR	ESS			Transaction ID: EXP.B.78210 Date of Disbursement
Mailing Address 1071 TWIN BRANCH	LANE			$\begin{bmatrix}\begin{smallmatrix}M\\0\\3\end{smallmatrix}\end{bmatrix}^{M} \begin{bmatrix}\begin{smallmatrix}D\\2\\5\end{smallmatrix}\end{bmatrix} \begin{bmatrix}\begin{smallmatrix}Y\\2\\0\\1\end{smallmatrix}\end{bmatrix} \begin{bmatrix}\begin{smallmatrix}Y\\2\\0\\1\end{smallmatrix}$
City WESTON	State Zip C			Amount of Each Disbursement this Period
Purpose of Disbursement			011	1000.00
Candidate Name DEBBIE WASSERMAN SCHULTZ		С	ategory/ Type	
Office Sought:    X   House   Disbu     Senate   President     State: FL   District: 20	rsement For:  X Primary Other (specify)	2010 General		
Full Name (Last, First, Middle Initial) WYDEN FOR SENATE				Transaction ID: EXP.B.78206 Date of Disbursement
Mailing Address 232 NE 9TH AVE.				$\begin{bmatrix}\begin{smallmatrix}M&3&M\\0&3&\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&2&5\\2&5&\end{smallmatrix}]/\begin{bmatrix}\begin{smallmatrix}Y&&Y&&Y&&Y\\&&2&0&1&0\end{smallmatrix}$
City PORTLAND	State Zip COR 972			Amount of Each Disbursement this Period
Purpose of Disbursement			011	4000.00
Candidate Name RONALD LEE WYDEN		С	Category/	
		0010		
X Senate President	rsement For:  X Primary Other (specify)	2010 General		
X Senate	X Primary	General		10000.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS			22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	EE (a.k.a. M	ledco Health PAC)
Full Name (Last, First, Middle Initial) M-PAC			Transaction ID: EXP.B.78219 Date of Disbursement
Mailing Address 607 14TH STREET, NW,	SUITE 800		$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
7	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement		011	5000.00
Candidate Name LEADERSHIP PAC	C	Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) PEOPLE FOR PATTY MURRAY			Transaction ID: EXP.B.78218 Date of Disbursement
Mailing Address P.O. BOX 3662			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & 2 \end{smallmatrix} 0 \overset{Y}{1} 0 \overset{Y}{1} \end{bmatrix}$
	State Zip Code WA 98124		Amount of Each Disbursement this Period
Purpose of Disbursement		011	5000.00
Candidate Name PATTY MURRAY		Category/ Type	
Office Sought:  House  X Senate  President  Disburse	ment For: 2010 Primary X General Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	•	10000.00
TOTAL This Period (last page this line number only)	<b>•</b>	54000.00

State: WA

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					for the purpose of soliciting contributions licit contributions from such committee
NAI	ME OF COMMITTEE (In Full) EDCO HEALTH SOLUTIONS				
	ll Name (Last, First, Middle Initial) SSEMBLY DEMOCRATIC CAN	MPAIGN COMMIT	TEE		Transaction ID: EXP.B.76918 Date of Disbursement
Mai	ailing Address 110 KING STR	EET, SUITE 203			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City MA	y ADISON	State WI	Zip Code 53703		Amount of Each Disbursement this Period
	rpose of Disbursement			011	1000.00
NC	ndidate Name DN-FEDERAL CONTRIBUTIO			Category/ Type	
	fice Sought: House Senate President District:	Disbursement For Primary Other (s			
Full	II Name (Last, First, Middle Initial) HARLIE GEREN CAMPAIGN	1			Transaction ID: EXP.B.76912 Date of Disbursement
Mai	ailing Address P.O. BOX 1440	)			$\begin{bmatrix}\begin{smallmatrix}M\\O3\end{smallmatrix}\end{bmatrix}^M  /  \begin{bmatrix}D\\O8\end{smallmatrix}\end{bmatrix}^M  \begin{bmatrix}Y\\2010\end{smallmatrix}$
City FO	y DRT WORTH	State TX	Zip Code 76101		Amount of Each Disbursement this Period
Pur	rpose of Disbursement			011	1000.00
	ndidate Name DN-FEDERAL CONTRIBUTIO	N		Category/ Type	
Offi	DN-FEDERAL CONTRIBUTIO fice Sought: House Senate President	Disbursement For Primary			
Offi Sta	DN-FEDERAL CONTRIBUTIO fice Sought: House Senate	Disbursement For Primary	X General		Transaction ID: EXP.B.76904 Date of Disbursement
Sta Full CIT	DN-FEDERAL CONTRIBUTIO fice Sought: House Senate President ate: TX District:  Il Name (Last, First, Middle Initial)	Disbursement For Primary Other (s	X General		
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	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	(check onl	NUMBER: PAGE 195 / 201
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30
	y Information copied from such Reports and State for commercial purposes, other than using the nan			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL			
<b>4</b> .	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT A REPUBLICAN	I SENATE		Transaction ID: EXP.B.76919 Date of Disbursement
	Mailing Address 148 EAST JOHNSON S	TREET		$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} N \\ O \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ O \end{smallmatrix} \begin{smallmatrix} N \\ O \end{smallmatrix} \begin{smallmatrix} N \\ O \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} N \\ N \end{smallmatrix}
	City MADISON	State Zip Code WI 53703		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	1000.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
	Office Sought:    House   Disburs     Senate   President     State:   District:	ement For: Primary General Other (specify)		
 3.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT NIEHAUS			Transaction ID: EXP.B.76907 Date of Disbursement
	Mailing Address 1131 LITTLE INDIAN C	REEK ROAD		03
	City NEW RICHMOND	State Zip Code OH 45157		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	1000.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
		ement For: 2012  Primary General Other (specify)		
 ).	Full Name (Last, First, Middle Initial) EDDIE LUCINO, III CAMPAIGN			Transaction ID: EXP.B.76914 Date of Disbursement
	Mailing Address 5136 SUGAR MILL RO	AD		$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City BROWNSVILLE	State Zip Code TX 78526		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name NON-FEDERAL COMMITTEE		Category/ Type	
	Office Sought:    House   Disburs	ement For: 2010 Primary X General Other (specify)		

# SCHEDULE B (FEC Form 3X)

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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POL	e and address of any politica	al comi	mitte	ee to sol	icit conti	ibuti	ons fr	om sı				
L	Full Name (Last, First, Middle Initial)					Trans				(P.B.	7690	)2	
<b>A</b> .	FRIENDS OF ARMOND BUDISH					Date		sburs				1 0	
	Mailing Address 23240 CHAGRIN BOUL	· 										а	
	CIEVELAND	State Zip Code OH 44122				Amou	int of	Each	Disb				riod
	Purpose of Disbursement			011						•	1000	).00	
	Candidate Name NON-FEDERAL CONTRIBUTION			tego Type									
		ement For: 2010 Primary General Other (specify)											
 3.	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOYD					Trans Date							
	Mailing Address 3623 CUMMINGS ROAL	)				0 3	M /		8	/ <u> </u>	20	ío՝	
	City CLEVELAND	State Zip Code OH 44118				Amou	int of	Each	Disb	ursen	nent th		riod
	Purpose of Disbursement  Candidate Name NON FEDERAL CONTRIBUTION		Ca	011 itego Type	ory/					•	500	J.UQ	
		ement For: 2010 Primary General Other (specify)	1	. ) [									
). -	Full Name (Last, First, Middle Initial) FRIENDS OF DON WHITE					Trans Date	of Di	sburs	emen				
	Mailing Address P.O. BOX 363					0 <sup>M</sup> 3	M /	D C	8	/ L	ž o	10	
	City INDIANA	State Zip Code PA 15701				Amou	int of	Each	Disb	ursen	nent th	nis Pe	riod
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	Candidate Name NON-FEDERAL CONTRIBUTION		Ca	tego Type	ory/								
	Senate President	ement For: 2012 Primary X General Other (specify)											
	State: PA District:												

## SCHEDULE B (FEC Form 3X)

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30
Any Information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and address of any politica	al committee to s	olicit contributions from such committee
Full Name (Last, First, Middle Initial) FRIENDS OF FABER  Mailing Address 7706 STATE RTE. 79	93		Transaction ID: EXP.B.76905 Date of Disbursement  O 3 D D D D D D D D D D D D D D D D D D
City CELINA Purpose of Disbursement	State Zip Code OH 45822		Amount of Each Disbursement this Period 500.00
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type	
Office Sought: House Disk Senate President State: OH District:	ursement For: 2012  X Primary General  Other (specify) ▼		
Full Name (Last, First, Middle Initial) FRIENDS OF HEARD  Mailing Address 2603 BURNABY DRI	WE.		Transaction ID: EXP.B.76903 Date of Disbursement  0 3 M / D 8 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BEXLEY Purpose of Disbursement  Candidate Name	State Zip Code OH 43209	011 Category/	Amount of Each Disbursement this Period 500.00
NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President  State: OH District:	ursement For: 2010  X Primary General  Other (specify) ▼	Туре	
Full Name (Last, First, Middle Initial) FRIENDS OF JOSEPH SCARNATI			Transaction ID: EXP.B.76909 Date of Disbursement
Mailing Address P.O. BOX 177  City	State Zip Code		Amount of Each Disbursement this Period
BROCKWAY Purpose of Disbursement	PA 15824	011	1000.00
Candidate Name NON-FEDERAL CONTRIBUTION	. <u>-</u>	Category/ Type	
Senate	ursement For: 2012 Primary X General Other (specify) ▼		
State: PA District:			

Any Information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL AND MEDCO HEALTH SOLUTION State OH DISBURSEMENT OH OH Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought:  House Disbursement Follows State OH  City State COLUMBUS OH  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought:  House Disbursement Follows Senate NON-FEDERAL CONTRIBUTION  Office Sought:  House Disbursement Follows Senate Non-Federal Control Primary OH Primar	JRT  Zip Code 44883  r: 2012  X General specify) ▼  ND FLOOR  Zip Code 43215	d by and community of the community of t	nittee to so	22 28a for the publicit control  Medco H  Trans Date  M  Amou	Health PA  Saction ID  of Disburs  M / D  cunt of Each  saction ID  of Disburs	P: EXP.II D: EXP	B.76910  Y Y Y O Y O Y O Y O O O O O O O O O O
or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL A  Full Name (Last, First, Middle Initial) KAREN GILLMOR FOR OHIO  Mailing Address 514 HEDGEGATE NORTH COLUMBUS Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate Primary Other (state: OH District:  Full Name (Last, First, Middle Initial) KASICH FOR OHIO  Mailing Address 14 EAST GAY STREET, SECONTRIBUTION  City State COLUMBUS OH Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House OH  City State COLUMBUS OH  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House OH  Senate OH  President State: OH  District:  Full Name (Last, First, Middle Initial)  MABRIE JACKSON CAMPAIGN	JRT  Zip Code 44883  r: 2012  X General specify) ▼  ND FLOOR  Zip Code 43215	O Cate	(a.k.a. I	Medco F  Trans Date  0 3  Amou	Health PA  Saction ID  of Disburs  M / D  cunt of Each  saction ID  of Disburs	P: EXP.II D: EXP	B.76910  Y Y O Y O Y 2 O 1 O Y  ement this Period  500.00  B.76900  Y Y O Y O Y 2 O Y O Y  ement this Period
Mailing Address 514 HEDGEGATE NORTH COL  City State TIFFIN OH  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate Primary President State: OH District:  Full Name (Last, First, Middle Initial) KASICH FOR OHIO  Mailing Address 14 EAST GAY STREET, SECON  City State COLUMBUS OH  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House OH  Senate OH  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Other (state)  Senate President State: OH District:  Full Name (Last, First, Middle Initial) MABRIE JACKSON CAMPAIGN	Zip Code 44883  r: 2012  X General specify) ▼  ND FLOOR  Zip Code 43215	Cate Ty	egory/ ype	Trans Date	of Disburs  M / D  (unt of Each  saction ID  of Disburs	ement 0 8  n Disburse  EXP.Fement 0 8	ement this Period  500.00  B.76900  Y Y O Y O Y  2 0 1 0 Y  ement this Period
TIFFIN Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate Primary President State: OH District:  Full Name (Last, First, Middle Initial) KASICH FOR OHIO  Mailing Address 14 EAST GAY STREET, SECONTRIBUTION  City State COLUMBUS OH Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: OH District:  Full Name (Last, First, Middle Initial) MABRIE JACKSON CAMPAIGN	44883  r: 2012  X General specify) ▼  ND FLOOR  Zip Code 43215	Cate Ty	egory/ ype	Trans Date	saction ID of Disburs	D: EXP.I	500.00  B.76900  Y
Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate Primary President Other (state: OH District:  Full Name (Last, First, Middle Initial) KASICH FOR OHIO  Mailing Address 14 EAST GAY STREET, SECONTRIBUTION  City State COLUMBUS OH Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate Primary President Noner (state: OH District:  Full Name (Last, First, Middle Initial) MABRIE JACKSON CAMPAIGN	X General specify)   ND FLOOR  Zip Code 43215	Cate Ty	egory/ ype	Date 0 3	of Disburs	sement	B.76900  Y Y Y O Y O Y  ement this Period
Full Name (Last, First, Middle Initial) KASICH FOR OHIO  Mailing Address 14 EAST GAY STREET, SECON  City State COLUMBUS OH  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President  State: OH District:  Full Name (Last, First, Middle Initial) MABRIE JACKSON CAMPAIGN	Zip Code 43215	Cate		Date 0 3	of Disburs	sement	Y 2 0 1 0 Y
CÓLUMBUS  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought:  House Senate President State: OH District:  Full Name (Last, First, Middle Initial) MABRIE JACKSON CAMPAIGN	43215	Cate		Amou	unt of Each	n Disburse	
NON-FEDERAL CONTRIBUTION  Office Sought: House Senate X Primary President Other (senate Other (senat		Cate					
Senate President Other (:  State: OH District:  Full Name (Last, First, Middle Initial) MABRIE JACKSON CAMPAIGN			ype				
MABRIE JACKSON CAMPAIGN							
Mailing Address 3209 GARY DRIVE				Date	saction ID of Disburs	ement	3.76913
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City State PLANO TX  Purpose of Disbursement	Zip Code 75023	I		Amou	unt of Eacl	n Disburse	ement this Period 500.00
Candidate Name NON-FEDERAL COMMITTEE		Cate	11 egory/ ype				
Office Sought:    House   Disbursement Fo							
SUBTOTAL of Disbursements This Page (optional)			. •				11000.00

	CHEDULE B (FEC FOIIII 3X)	Use sep	arate schedule(s)	FOR LINE (check on	E NUMBER: PAGE 199 / 201
	EMIZED DISBURSEMENTS	Detailed	category of the Summary Page	21b 27	22 23 24 25 28a 28b 28c X 29
	y Information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)				
<i>)</i> _	MEDCO HEALTH SOLUTIONS INC.	POLITICAL AC	CTION COMMI	TTEE (a.k.a.	Medco Health PAC)
	Full Name (Last, First, Middle Initial) REPUBLICAN ASSEMBLY CAMPAIO	GN COMMITTE	iΕ		Transaction ID: EXP.B.76920 Date of Disbursement
	Mailing Address 148 EAST JOHNSO	ON STREET			03 08 7 2010
	City MADISON	State WI	Zip Code 53703		Amount of Each Disbursement this Perio
	Purpose of Disbursement			011	1000.00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type	
	Senate President	sbursement For: Primary Other (spe	General ecify) ▼		
	State: District:  Full Name (Last, First, Middle Initial)  SEITZ FOR SENATE COMMITTEE				Transaction ID: EXP.B.76908 Date of Disbursement
	Mailing Address 4401 ABBY COUR	Т			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City CINCINNATI	State OH	Zip Code 45248		Amount of Each Disbursement this Perio
	Purpose of Disbursement			011	500.00
	Candidate Name NON FEDERAL CONTRIBUTION			Category/ Type	
	Senate President	sbursement For:  X Primary  Other (spe	2012 General ecify)	,	
_	State: OH District:  Full Name (Last, First, Middle Initial)  STATE SENATE DEMOCRATIC CO	MMITTEE			Transaction ID: EXP.B.76917 Date of Disbursement
	Mailing Address 110 KING STREET	, SUITE 203			03
	City MADISON	State WI	Zip Code 53703		Amount of Each Disbursement this Perio
	Purpose of Disbursement			011	2000.00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type	
	NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President	sbursement For: Primary Other (spo	General ecify) ▼		
	NON-FEDERAL CONTRIBUTION  Office Sought: House Senate	Primary			

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 200 / 201
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28a 28b 28c X 29
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. PO			
Full Name (Last, First, Middle Initial) TEXANS FOR JOE STRAUS			Transaction ID: EXP.B.76915 Date of Disbursement  O 3
Mailing Address PO BOX 90388			03 08 2010
City San Antonio	State Zip Code TX 78209		Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name		011	1300.00
NON-FEDERAL CONTRIBUTION		Category/ Type	
Senate President	resement For: 2010 Primary X General Other (specify) ▼		
State: TX District:  Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.76916
TEXAS HOUSE LEADERSHIP PAC			Date of Disbursement
Mailing Address PO BOX 90388			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City SAN ANTONIO	State Zip Code TX 78209		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	5000.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Senate President	sement For: Primary General Other (specify)	71-1	
State: TX District:  Full Name (Last, First, Middle Initial)  FRIENDS OF JULISSA NOLASCO ORT	IZ COMM		Transaction ID: EXP.B.77557 Date of Disbursement
Mailing Address COND. FLAMBOYANE	S, APARTAMENTO 421		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 1 & 1 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City PONCE	State Zip Code PR 00716		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Senate President	sement For: 2012 Primary X General Other (specify) ▼	71 -	
State: District:			
SUBTOTAL of Disbursements This Page (optional	l)	<b>&gt;</b>	7000.00
TOTAL This Period (last page this line number on	ly)		30500.00

### SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each numbered line)

PAGE 201 / 201 FOR LINE NUMBER:

(check only one)

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**Excluding Loans** 

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

-Acidaning Edanis		/   X   10
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL ACTION COMMITTEE (a.k	.a. Medco Health PAC)
A. Full Name (Last, First, Middle Initi NIELSEN, MERKSAMER, PARF	Nature of Debt (Purpose):	
Mailing Address 1415 L STREET	, STE. 1200	
City State SACRAMENTO CA	ZIP Code 95814	
Outstanding Balance Beginning Th	is Period	Transaction ID: PAY:D:74943
244.00	0	
Amount Incurred This Perio	d Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	244.00
B. Full Name (Last, First, Middle Initi NIELSEN, MERKSAMER, PARF Mailing Address 1415 L STREET	RINELLO, MUELLER, & NAYLOR, LLP	Nature of Debt (Purpose): LEGAL & ACCOUNTING SERVIC- ES
City State SACRAMENTO CA	ZIP Code 95814	
Outstanding Balance Beginning Th		Transaction ID: PAY:D:76243
857.79	• •	Transaction ib. FAT.D.70243
Amount Incurred This Perio	<u> </u>	Outstanding Palance at Class of This Paying
	<del> </del>	Outstanding Balance at Close of This Period
0.00	0.00	857.75
1) SUBTOTALS This Period This Pag	e (optional)	▶ 1101.75
2) TOTALS This Period (last page this l	line number only)	▶ 1101.75
3) TOTAL OUTSTANDING LOANS	from Schedule C (last page only)	▶ 0.00
4) ADD 2) and 3) and carry forward to	appropriate line of Summary Page (last page only	) <b>1101.75</b>