

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 2211 Sanders Road, 10th Floor
 Check if different than previously reported. (ACC)
Northbrook IL 60062

2. **FEC IDENTIFICATION NUMBER** C00384818
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 03 01 2007 through 03 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer James C. Luthin
Signature of Treasurer Electronically Filed by James C. Luthin Date 04 17 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Caremark Rx Inc. Employees Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		122465.00
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	98255.00									
(c) Total Receipts (from Line 19)	17255.00	51645.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	115510.00	174110.00								
7. Total Disbursements (from Line 31)	30500.00	89100.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	85010.00	85010.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Caremark Rx Inc. Employees Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	13914.00	28594.00
(i) Itemized (use Schedule A)	3341.00	23051.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	17255.00	51645.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17255.00	51645.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17255.00	51645.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17255.00	51645.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	100.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	30500.00	84000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	5000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	30500.00	89100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	30500.00	89100.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	17255.00	51645.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17255.00	51645.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	100.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	100.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lora Armstrong

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director, P&T Formulary Proces

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23638

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lora Armstrong

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Director, P&T Formulary Proces

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23848

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Kray Arnold

Mailing Address 9501 E Shea Blvd

City State Zip Code
Scottsdale AZ 85260-6719

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

Name of Employer Caremark Occupation MGR IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23639

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 105.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kray Arnold

Mailing Address 9501 E Shea Blvd

City State Zip Code
Scottsdale AZ 85260-6719

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

Name of Employer Caremark Occupation MGR IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23849

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jeffrey Audley

Mailing Address 7034 Alamo Downs Parkway

City State Zip Code
San Antonio TX 78238-4509

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

Name of Employer Caremark Occupation VP Planning & Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23641

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jeffrey Audley

Mailing Address 7034 Alamo Downs Parkway

City State Zip Code
San Antonio TX 78238-4509

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

Name of Employer Caremark Occupation VP Planning & Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23851

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	189.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Neal Baker		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23642
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP Legal Services & Managing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) B. Neal Baker		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23852
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP Legal Services & Managing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

Full Name (Last, First, Middle Initial) C. Robert Baldino		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23643
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP Client Benefit Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

SUBTOTAL of Receipts This Page (optional) ▶	231.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert Baldino		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007	
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23853	
City Northbrook	State IL	Amount of Each Receipt this Period 77.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.00	
Name of Employer Caremark	Occupation VP Client Benefit Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00		

Full Name (Last, First, Middle Initial) B. Lauren Baldwin		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007	
Mailing Address 1300 I Street NW Suite 525 West		Transaction ID: 70329.C23644	
City Washington	State DC	Amount of Each Receipt this Period 120.00	
Zip Code 20005		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00	
Name of Employer Caremark	Occupation VP STATE GOVERNMENT RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. Lauren Baldwin		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007	
Mailing Address 1300 I Street NW Suite 525 West		Transaction ID: 70329.C23854	
City Washington	State DC	Amount of Each Receipt this Period 120.00	
Zip Code 20005		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00	
Name of Employer Caremark	Occupation VP STATE GOVERNMENT RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00		

SUBTOTAL of Receipts This Page (optional) ▶	317.00
TOTAL This Period (last page this line number only) ▶	317.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

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

Mailing Address 15803 Strickland Court

City State Zip Code
Charlotte NC 28277

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

Name of Employer Caremark Occupation VP Area Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23645

Amount of Each Receipt this Period
35.00

Receipt

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

Mailing Address 15803 Strickland Court

City State Zip Code
Charlotte NC 28277

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

Name of Employer Caremark Occupation VP Area Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23855

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Tracy L Baroni Allmon

Mailing Address 1300 I St NW Ste 525

City State Zip Code
Washington DC 20005-7845

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

Name of Employer Caremark Occupation VP Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23646

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	170.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Tracy L Baroni Allmon

Mailing Address 1300 I St NW Ste 525

City Washington State DC Zip Code 20005-7845

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

Name of Employer Caremark Occupation VP Government Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
03 / 23 / 2007

Transaction ID: 70329.C23856

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jan E Berger

Mailing Address 2211 Sanders Road 10th Floor

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation SVP Chief Clinical Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
03 / 09 / 2007

Transaction ID: 70329.C23648

Amount of Each Receipt this Period
130.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jan E Berger

Mailing Address 2211 Sanders Road 10th Floor

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation SVP Chief Clinical Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt
03 / 23 / 2007

Transaction ID: 70329.C23858

Amount of Each Receipt this Period
130.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	360.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial) H. K. Bessant Mailing Address 9501 East Shea Blvd City State Zip Code Scottsdale AZ 85260 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007 Transaction ID: 70329.C23649 Amount of Each Receipt this Period 40.00 Receipt
Name of Employer Occupation Caremark VP CONSUMER PROGRAMS Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		

B. Full Name (Last, First, Middle Initial) H. K. Bessant Mailing Address 9501 East Shea Blvd City State Zip Code Scottsdale AZ 85260 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007 Transaction ID: 70329.C23859 Amount of Each Receipt this Period 40.00 Receipt
Name of Employer Occupation Caremark VP CONSUMER PROGRAMS Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00		

C. Full Name (Last, First, Middle Initial) Laura Birmingham Mailing Address 211 Commerce Street Suite 800 City State Zip Code Nashville TN 37201-1817 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007 Transaction ID: 70329.C23650 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer Occupation Caremark SVP Internal Audit Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	180.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Laura Birmingham

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation SVP Internal Audit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23860

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Frederick Burns

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Dir Materials Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23660

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Frederick Burns

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Dir Materials Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23870

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	170.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Joanne Carlson		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23664
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Caremark Dir Strategic HR Business Part	Aggregate Year-to-Date ▼ 175.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joanne Carlson		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23874
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Caremark Dir Strategic HR Business Part	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Peter Clemens		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 70329.C23666
City State Zip Code Nashville TN 37201-1817	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Caremark SVP Finance Treasurer	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	170.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Peter Clemens

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation SVP Finance Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23876

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Debra Connell-Deleeuw

Mailing Address 9501 East Shea Blvd

City Scottsdale State AZ Zip Code 85260

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

Name of Employer Advanced PCS Occupation DIR IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23668

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Debra Connell-Deleeuw

Mailing Address 9501 East Shea Blvd

City Scottsdale State AZ Zip Code 85260

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

Name of Employer Advanced PCS Occupation DIR IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23878

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	170.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Andrew Crawford

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation SVP Industry Analysis Pricing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 70329.C23669

Amount of Each Receipt this Period
150.00

Receipt

B. Full Name (Last, First, Middle Initial)
Andrew Crawford

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation SVP Industry Analysis Pricing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 7

Transaction ID: 70329.C23879

Amount of Each Receipt this Period
150.00

Receipt

C. Full Name (Last, First, Middle Initial)
Edwin Crawford

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation CHAIRMAN & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 7

Transaction ID: 70329.C23670

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Edwin Crawford

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation CHAIRMAN & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23880

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kenneth Czarnecki

Mailing Address 750 W. John Carpenter Fwy
Suite 1200

City Irving State TX Zip Code 75039

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

Name of Employer Caremark Occupation SVP Mail Pharmacies

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23672

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Kenneth Czarnecki

Mailing Address 750 W. John Carpenter Fwy
Suite 1200

City Irving State TX Zip Code 75039

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

Name of Employer Caremark Occupation SVP Mail Pharmacies

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23882

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	400.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Yolanda Daniel

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Dir, Audit Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23673

Amount of Each Receipt this Period
85.00

Receipt

B. Full Name (Last, First, Middle Initial)
Yolanda Daniel

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Dir, Audit Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23883

Amount of Each Receipt this Period
85.00

Receipt

C. Full Name (Last, First, Middle Initial)
James Dixon

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Dir, Industry Analysis & Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23674

Amount of Each Receipt this Period
40.00

Receipt

SUBTOTAL of Receipts This Page (optional)	210.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. James Dixon		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 7
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23884
City Northbrook	State IL	Amount of Each Receipt this Period 40.00
Zip Code 60062-6150	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Caremark	Occupation Dir, Industry Analysis & Admin	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Philip Ellison Jr		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 70329.C23676
City Irving	State TX	Amount of Each Receipt this Period 35.00
Zip Code 75039	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Caremark	Occupation AVP Staffing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

Full Name (Last, First, Middle Initial) C. Philip Ellison Jr		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 7
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 70329.C23886
City Irving	State TX	Amount of Each Receipt this Period 35.00
Zip Code 75039	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Caremark	Occupation AVP Staffing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	110.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Timothy Fancher

Mailing Address 2105 Eagle Parkway

City State Zip Code
Fort Worth TX 76177

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

Name of Employer Caremark Occupation Dir Pharmacy Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23677

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
Timothy Fancher

Mailing Address 2105 Eagle Parkway

City State Zip Code
Fort Worth TX 76177

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

Name of Employer Caremark Occupation Dir Pharmacy Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23887

Amount of Each Receipt this Period
40.00

Receipt

C. Full Name (Last, First, Middle Initial)
A. L. Faudskar

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP Clinical

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23678

Amount of Each Receipt this Period
55.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 135.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 75
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. A. L. Faudskar		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 9501 East Shea Blvd		Transaction ID: 70329.C23888
City Scottsdale	State AZ	Zip Code 85260
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Caremark	Occupation VP Clinical	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. Lucia Feczko		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23679
City Northbrook	State IL	Zip Code 60062-6150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation Dir Clinical Services	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

Full Name (Last, First, Middle Initial) C. Lucia Feczko		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23889
City Northbrook	State IL	Zip Code 60062-6150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation Dir Clinical Services	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Michael Fieri		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007	
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23681	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP Specialty Field Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Michael Fieri		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007	
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23891	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP Specialty Field Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) C. Sara Finley		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 70329.C23682	
City State Zip Code Nashville TN 37201-1817	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SVP Assistant General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Sara Finley		Date of Receipt MM / DD / YYYY 03 / 23 / 2007
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 70329.C23892
City Nashville	State TN	Zip Code 37201-1817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Caremark	Occupation SVP Assistant General Counsel	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Christopher Freed		Date of Receipt MM / DD / YYYY 03 / 09 / 2007
Mailing Address 9501 East Shea Blvd		Transaction ID: 70329.C23686
City Scottsdale	State AZ	Zip Code 85260
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Caremark	Occupation VP Clinical	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Christopher Freed		Date of Receipt MM / DD / YYYY 03 / 23 / 2007
Mailing Address 9501 East Shea Blvd		Transaction ID: 70329.C23896
City Scottsdale	State AZ	Zip Code 85260
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Caremark	Occupation VP Clinical	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jane Freyer

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Dir, State & Local Taxes

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23687

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jane Freyer

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Dir, State & Local Taxes

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23897

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Joseph Gallo

Mailing Address 5480 Sunstone Lane

City State Zip Code
Castle Rock CO 80104

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

Name of Employer Caremark Occupation VP Area Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23688

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	105.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Joseph Gallo		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007	
Mailing Address 5480 Sunstone Lane		Transaction ID: 70329.C23898	
City State Zip Code Castle Rock CO 80104	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP Area Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Catherine Gaudio		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007	
Mailing Address 9501 East Shea Blvd		Transaction ID: 70329.C23691	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Dir Strategic HR Business Part		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) C. Catherine Gaudio		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007	
Mailing Address 9501 East Shea Blvd		Transaction ID: 70329.C23901	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Dir Strategic HR Business Part		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	135.00
TOTAL This Period (last page this line number only)	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Douglas Ghertner

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation VP, Corporate Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	0	7

Transaction ID: 70329.C23693

Amount of Each Receipt this Period

35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Douglas Ghertner

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation VP, Corporate Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	7

Transaction ID: 70329.C23903

Amount of Each Receipt this Period

35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Michael Gill

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation VP, Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	0	7

Transaction ID: 70329.C23697

Amount of Each Receipt this Period

77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>147.00</td></tr></table>	147.00
147.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 75
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Michael Gill		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007	
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23907	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP, Risk Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00		

Full Name (Last, First, Middle Initial) B. David Golding		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007	
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 70329.C23700	
City State Zip Code Northbrook IL 60062-2507	Amount of Each Receipt this Period 135.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SVP SPECIALTY PHARMACY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00		

Full Name (Last, First, Middle Initial) C. David Golding		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007	
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 70329.C23910	
City State Zip Code Northbrook IL 60062-2507	Amount of Each Receipt this Period 135.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SVP SPECIALTY PHARMACY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00		

SUBTOTAL of Receipts This Page (optional) ▶	347.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 75						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Gerard Greene		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2007	
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23701	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP FINANCE	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 175.00			

Full Name (Last, First, Middle Initial) B. Gerard Greene		Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2007	
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23911	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP FINANCE	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 210.00			

Full Name (Last, First, Middle Initial) C. Edward L Hardin Jr.		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2007	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 70329.C23707	
City State Zip Code Nashville TN 37201-1817	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation EVP General Counsel & Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 750.00			

SUBTOTAL of Receipts This Page (optional) ▶	220.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Edward L Hardin Jr.

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation EVP General Counsel & Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23917

Amount of Each Receipt this Period
150.00

Receipt

B. Full Name (Last, First, Middle Initial)
Eddie Holmes

Mailing Address 9501 East Shea Blvd

City Scottsdale State AZ Zip Code 85260

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

Name of Employer Caremark Occupation DIR IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23714

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Eddie Holmes

Mailing Address 9501 East Shea Blvd

City Scottsdale State AZ Zip Code 85260

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

Name of Employer Caremark Occupation DIR IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23924

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	220.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Constance Isley		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23717
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP, Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) B. Constance Isley		Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23927
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP, Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

Full Name (Last, First, Middle Initial) C. Jeffrey Jackson		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2007
Mailing Address 9501 East Shea Blvd		Transaction ID: 70329.C23718
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP Implementations & Claim Pro	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional) ▶	194.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey Jackson

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP Implementations & Claim Pro

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23928

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
John David Joyner

Mailing Address 750 W. John Carpenter Fwy Suite 1200

City State Zip Code
Irving TX 75039-2507

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

Name of Employer Caremark Occupation EVP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23725

Amount of Each Receipt this Period
135.00

Receipt

C. Full Name (Last, First, Middle Initial)
John David Joyner

Mailing Address 750 W. John Carpenter Fwy Suite 1200

City State Zip Code
Irving TX 75039-2507

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

Name of Employer Caremark Occupation EVP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23935

Amount of Each Receipt this Period
135.00

Receipt

SUBTOTAL of Receipts This Page (optional)	310.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Bradley Karro

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation EVP CORPORATE DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 09 / 2007

Transaction ID: 70329.C23727

Amount of Each Receipt this Period
 135.00

Receipt

B. Full Name (Last, First, Middle Initial)
Bradley Karro

Mailing Address 211 Commerce Street
Suite 800

City Nashville State TN Zip Code 37201-1817

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

Name of Employer Caremark Occupation EVP CORPORATE DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 23 / 2007

Transaction ID: 70329.C23937

Amount of Each Receipt this Period
 135.00

Receipt

C. Full Name (Last, First, Middle Initial)
Geoffrey Kilgore

Mailing Address 5607 Glenridge Drive
Suite 300

City Atlanta State GA Zip Code 30342

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

Name of Employer Caremark Occupation VP Account Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 09 / 2007

Transaction ID: 70329.C23730

Amount of Each Receipt this Period
 80.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	350.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Geoffrey Kilgore

Mailing Address 5607 Glenridge Drive
Suite 300

City Atlanta State GA Zip Code 30342

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

Name of Employer Caremark Occupation VP Account Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 0 7

Transaction ID: 70329.C23940

Amount of Each Receipt this Period
 80.00

Receipt

B. Full Name (Last, First, Middle Initial)
James King

Mailing Address 9501 East Shea Blvd

City Scottsdale State AZ Zip Code 85260

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

Name of Employer Caremark Occupation VP CLIENT SERVICES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 0 9 / 2 0 0 7

Transaction ID: 70329.C23731

Amount of Each Receipt this Period
 77.00

Receipt

C. Full Name (Last, First, Middle Initial)
James King

Mailing Address 9501 East Shea Blvd

City Scottsdale State AZ Zip Code 85260

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

Name of Employer Caremark Occupation VP CLIENT SERVICES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 0 7

Transaction ID: 70329.C23941

Amount of Each Receipt this Period
 77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	234.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Kelli Kovak		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23734
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation Dir Data & Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

Full Name (Last, First, Middle Initial) B. Kelli Kovak		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23944
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation Dir Data & Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Charles Krause		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23735
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP, Corporate Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

SUBTOTAL of Receipts This Page (optional) ▶	147.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Charles Krause

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP, Corporate Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23945

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Steven Kunz

Mailing Address 109 East 2nd Street #11

City State Zip Code
New York NY 10009

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

Name of Employer Caremark Occupation Sales Executive Strategic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23737

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Steven Kunz

Mailing Address 109 East 2nd Street #11

City State Zip Code
New York NY 10009

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

Name of Employer Caremark Occupation Sales Executive Strategic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23947

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	147.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Timothy Kurth		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23738
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation VP e-Business	Aggregate Year-to-Date ▼ 175.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Timothy Kurth		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23948
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation VP e-Business	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hetty Lima		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23740
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation VP MARKETING	Aggregate Year-to-Date ▼ 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	110.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Hetty Lima

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation VP MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23950

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
James C Luthin

Mailing Address 2211 Sanders Road
10th Floor

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation SVP Finance Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23746

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
James C Luthin

Mailing Address 2211 Sanders Road
10th Floor

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation SVP Finance Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23957

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	240.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Bruce Lyons

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation SVP Employer Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23747

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Bruce Lyons

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation SVP Employer Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23958

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Bruce MacRae

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP Area Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23748

Amount of Each Receipt this Period
55.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	209.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Bruce MacRae

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP Area Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23959

Amount of Each Receipt this Period
55.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gregory Madsen

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation SVP Retail Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23749

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gregory Madsen

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation SVP Retail Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23960

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	209.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
James Margiotta

Mailing Address 750 W John Carpenter Fwy Ste 1200

City Irving State TX Zip Code 75039-2507

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

Name of Employer Caremark Occupation VP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23751

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
James Margiotta

Mailing Address 750 W John Carpenter Fwy Ste 1200

City Irving State TX Zip Code 75039-2507

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

Name of Employer Caremark Occupation VP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23962

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Thomas McInally

Mailing Address 2105 Eagle Parkway

City Fort Worth State TX Zip Code 76177

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

Name of Employer Caremark Occupation Dir Pharmacy Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23755

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	189.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Thomas McInally

Mailing Address 2105 Eagle Parkway

City State Zip Code
Fort Worth TX 76177

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

Name of Employer Caremark Occupation Dir Pharmacy Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23966

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Phillip Mcleod

Mailing Address 750 W. John Carpenter Fwy Suite 1200

City State Zip Code
Irving TX 75039

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

Name of Employer Caremark Occupation VP FINANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23757

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Phillip Mcleod

Mailing Address 750 W. John Carpenter Fwy Suite 1200

City State Zip Code
Irving TX 75039

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

Name of Employer Caremark Occupation VP FINANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23968

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	189.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Howard McLure		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 70329.C23758
City Nashville State TN Zip Code 37201-1817	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation CHIEF OPERATING OFFICER	Aggregate Year-to-Date ▼ 750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Howard McLure		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 70329.C23969
City Nashville State TN Zip Code 37201-1817	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation CHIEF OPERATING OFFICER	Aggregate Year-to-Date ▼ 900.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ronald Merlino		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 9501 East Shea Blvd		Transaction ID: 70329.C23761
City Scottsdale State AZ Zip Code 85260	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SVP CIO	Aggregate Year-to-Date ▼ 750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ronald Merlino

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation SVP CIO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23972

Amount of Each Receipt this Period
150.00

Receipt

B. Full Name (Last, First, Middle Initial)
Glenn Mitchell

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP Area Specialty Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23764

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Glenn Mitchell

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP Area Specialty Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23975

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	220.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Rudy Mladenovic

Mailing Address 750 W. John Carpenter Fwy.
Suite 1200

City Irving State TX Zip Code 75039

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

Name of Employer Caremark Occupation EVP Industry Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23765

Amount of Each Receipt this Period
192.00

Receipt

B. Full Name (Last, First, Middle Initial)
Rudy Mladenovic

Mailing Address 750 W. John Carpenter Fwy.
Suite 1200

City Irving State TX Zip Code 75039

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

Name of Employer Caremark Occupation EVP Industry Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1152.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C23976

Amount of Each Receipt this Period
192.00

Receipt

C. Full Name (Last, First, Middle Initial)
Marsha Moore

Mailing Address 9501 East Shea Blvd

City Scottsdale State AZ Zip Code 85260

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

Name of Employer Caremark Occupation SVP MEDICAL AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23767

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	434.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Marsha Moore		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 9501 East Shea Blvd		Transaction ID: 70329.C23978
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation SVP MEDICAL AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Diane Nobles		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 70329.C23770
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation EVP Compliance & Integrity	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00	

Full Name (Last, First, Middle Initial) C. Diane Nobles		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 70329.C23981
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation EVP Compliance & Integrity	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1152.00	

SUBTOTAL of Receipts This Page (optional) ▶	434.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joseph Piazza

Mailing Address 4240 Harpers Ferry Circle

City Birmingham State AL Zip Code 35213-2223

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

Name of Employer Caremark Occupation DIR AVIATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 0 9 / 2 0 0 7

Transaction ID: 70329.C23778

Amount of Each Receipt this Period
 35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joseph Piazza

Mailing Address 4240 Harpers Ferry Circle

City Birmingham State AL Zip Code 35213-2223

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

Name of Employer Caremark Occupation DIR AVIATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 3 / 2 0 0 7

Transaction ID: 70329.C23989

Amount of Each Receipt this Period
 35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Kevin Plunkett

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Sr Legal Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 0 9 / 2 0 0 7

Transaction ID: 70329.C23780

Amount of Each Receipt this Period
 35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	105.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kevin Plunkett

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Sr Legal Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23991

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Natalie Pons

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Advanced PCS Occupation VP Legal Services & Managing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23783

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Natalie Pons

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Advanced PCS Occupation VP Legal Services & Managing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23994

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	135.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Scott Ragland

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP IT CORE BUSINESS SYSTEMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23784

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Scott Ragland

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP IT CORE BUSINESS SYSTEMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23995

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
John Scott Reid

Mailing Address 2211 Sanders Rd

City State Zip Code
Northbrook IL 60062

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

Name of Employer Caremark Occupation VP Specialty Pharmacy Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23785

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	231.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. John Scott Reid		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 2211 Sanders Rd		Transaction ID: 70329.C23996
City State Zip Code Northbrook IL 60062	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation VP Specialty Pharmacy Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

Full Name (Last, First, Middle Initial) B. Dina Reynolds		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 7034 Alamo Downs Pkwy		Transaction ID: 70329.C23786
City State Zip Code San Antonio TX 78238-4509	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation Dir Pharmacy Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

Full Name (Last, First, Middle Initial) C. Dina Reynolds		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 7034 Alamo Downs Pkwy		Transaction ID: 70329.C23997
City State Zip Code San Antonio TX 78238-4509	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation Dir Pharmacy Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	147.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stephen Rill

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Dir TPA Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23788

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Stephen Rill

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Dir TPA Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C23999

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Russell Ring

Mailing Address 1300 I Street NW Suite 525 West

City State Zip Code
Washington DC 20005

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

Name of Employer Caremark Occupation SVP GOVERNMENT RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23789

Amount of Each Receipt this Period
192.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	262.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Russell Ring		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 1300 I Street NW Suite 525 West		Transaction ID: 70329.C24000
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SVP GOVERNMENT RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1152.00		

Full Name (Last, First, Middle Initial) B. Joel Saban		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23794
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation VP, Industry Analysis & Adm		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) C. Joel Saban		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C24005
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation VP, Industry Analysis & Adm		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	272.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lisa Schuldes

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP Finance Trade Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23800

Amount of Each Receipt this Period
50.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lisa Schuldes

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP Finance Trade Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C24011

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Wendy See

Mailing Address 17 Honey Bear Court

City State Zip Code
Little Rock AR 72223

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

Name of Employer Caremark Occupation Account Executive Specialty

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23801

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 75
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Wendy See

Mailing Address 17 Honey Bear Court

City State Zip Code
Little Rock AR 72223

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

Name of Employer Caremark Occupation Account Executive Specialty

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	7

Transaction ID: 70329.C24012

Amount of Each Receipt this Period
50.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kay Shafer

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP Account Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	0	7

Transaction ID: 70329.C23802

Amount of Each Receipt this Period
78.00

Receipt

C. Full Name (Last, First, Middle Initial)
Kay Shafer

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP Account Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	7

Transaction ID: 70329.C24013

Amount of Each Receipt this Period
78.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	206.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Tommy Sheer

Mailing Address 7034 Alamo Downs Parkway

City State Zip Code
San Antonio TX 78238-4222

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

Name of Employer Caremark Occupation VP GENERAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23803

Amount of Each Receipt this Period
50.00

Receipt

B. Full Name (Last, First, Middle Initial)
Tommy Sheer

Mailing Address 7034 Alamo Downs Parkway

City State Zip Code
San Antonio TX 78238-4222

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

Name of Employer Caremark Occupation VP GENERAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C24014

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gerald Simpson

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Dir Project Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23805

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	135.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gerald Simpson

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Dir Project Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 23 / 2007

Transaction ID: 70329.C24016

Amount of Each Receipt this Period
 35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Christopher Sims

Mailing Address 750 W. John Carpenter Fwy Suite 1200

City Irving State TX Zip Code 75039

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

Name of Employer Caremark Occupation VP TRADE RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 09 / 2007

Transaction ID: 70329.C23806

Amount of Each Receipt this Period
 77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Christopher Sims

Mailing Address 750 W. John Carpenter Fwy Suite 1200

City Irving State TX Zip Code 75039

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

Name of Employer Caremark Occupation VP TRADE RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 23 / 2007

Transaction ID: 70329.C24017

Amount of Each Receipt this Period
 77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	189.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Gary Slagle		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 70329.C23808
City Nashville State TN Zip Code 37201-1817	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SVP Corporate Development	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gary Slagle		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 70329.C24019
City Nashville State TN Zip Code 37201-1817	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SVP Corporate Development	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Alice Sloan		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 11311 McCormick Road Building 75, Suite 230		Transaction ID: 70329.C23809
City Hunt Valley State MD Zip Code 21031	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation VP ACCOUNT MANAGEMENT	Aggregate Year-to-Date ▼ 375.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Alice Sloan

Mailing Address 11311 McCormick Road
Building 75, Suite 230

City State Zip Code
Hunt Valley MD 21031

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

Name of Employer Caremark Occupation VP ACCOUNT MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C24020

Amount of Each Receipt this Period
75.00

Receipt

B. Full Name (Last, First, Middle Initial)
Yvonne Southwell

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP Medical Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23811

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Yvonne Southwell

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP Medical Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C24022

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	229.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

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

Mailing Address 211 Commerce Street

City State Zip Code
Nashville TN 37201-1806

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

Name of Employer Caremark Occupation EVP Strategic Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23812

Amount of Each Receipt this Period
192.00

Receipt

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

Mailing Address 211 Commerce Street

City State Zip Code
Nashville TN 37201-1806

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

Name of Employer Caremark Occupation EVP Strategic Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1152.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C24023

Amount of Each Receipt this Period
192.00

Receipt

C. Full Name (Last, First, Middle Initial)
David Specht

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP Claim Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23813

Amount of Each Receipt this Period
40.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	424.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
David Specht

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260

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

Name of Employer Caremark Occupation VP Claim Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C24024

Amount of Each Receipt this Period
40.00

Receipt

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

Mailing Address 11311 McCormick Road
Building 75, Suite 230

City State Zip Code
Hunt Valley MD 21031

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

Name of Employer Caremark Occupation SVP Health Plan Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23814

Amount of Each Receipt this Period
50.00

Receipt

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

Mailing Address 11311 McCormick Road
Building 75, Suite 230

City State Zip Code
Hunt Valley MD 21031

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

Name of Employer Caremark Occupation SVP Health Plan Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C24025

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	140.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Carolyn Stang		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23816
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation VP CLINICAL SERVICES	Aggregate Year-to-Date ▼ 385.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Carolyn Stang		Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C24027
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 77.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation VP CLINICAL SERVICES	Aggregate Year-to-Date ▼ 462.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Paul Stivender		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2007
Mailing Address 3000 Galleria Tower Ste 1000		Transaction ID: 70329.C23818
City State Zip Code Birmingham AL 35244-2359	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation SVP Facilities	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	204.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Paul Stivender

Mailing Address 3000 Galleria Tower Ste 1000

City Birmingham State AL Zip Code 35244-2359

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

Name of Employer Caremark Occupation SVP Facilities

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 23 / 2007

Transaction ID: 70329.C24029

Amount of Each Receipt this Period
 50.00

Receipt

B. Full Name (Last, First, Middle Initial)
Sidney Stolz

Mailing Address 1300 I Street NW Suite 525 West

City Washington State DC Zip Code 20005-3336

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

Name of Employer Caremark Occupation SVP MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 09 / 2007

Transaction ID: 70329.C23819

Amount of Each Receipt this Period
 100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Sidney Stolz

Mailing Address 1300 I Street NW Suite 525 West

City Washington State DC Zip Code 20005-3336

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

Name of Employer Caremark Occupation SVP MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 23 / 2007

Transaction ID: 70329.C24030

Amount of Each Receipt this Period
 100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 250.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Marian Swanson		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007	
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23820	
City Northbrook	State IL	Amount of Each Receipt this Period 40.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation VP Employee Benefits		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) B. Marian Swanson		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2007	
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C24031	
City Northbrook	State IL	Amount of Each Receipt this Period 40.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation VP Employee Benefits		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Albert Thigpen		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007	
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23821	
City Northbrook	State IL	Amount of Each Receipt this Period 35.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation VP TRADE RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00		

SUBTOTAL of Receipts This Page (optional) ▶	115.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Albert Thigpen

Mailing Address 2211 Sanders Road

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation VP TRADE RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C24032

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Andrew Ursitti

Mailing Address 750 W. John Carpenter Fwy Suite 1200

City Irving State TX Zip Code 75039-2507

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

Name of Employer Caremark Occupation VP, Finance/Asst Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23825

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Andrew Ursitti

Mailing Address 750 W. John Carpenter Fwy Suite 1200

City Irving State TX Zip Code 75039-2507

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

Name of Employer Caremark Occupation VP, Finance/Asst Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C24036

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	189.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Leslie Wachsman

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP, Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23828

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Leslie Wachsman

Mailing Address 2211 Sanders Road

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation VP, Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2007

Transaction ID: 70329.C24039

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gloria Walker

Mailing Address 7034 Alamo Downs Pkwy

City State Zip Code
San Antonio TX 78238-4509

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

Name of Employer Caremark Occupation Dir Process Improvement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2007

Transaction ID: 70329.C23829

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	105.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gloria Walker

Mailing Address 7034 Alamo Downs Pkwy

City San Antonio State TX Zip Code 78238-4509

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

Name of Employer Caremark Occupation Dir Process Improvement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 23 / 2007

Transaction ID: 70329.C24040

Amount of Each Receipt this Period
 35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lee Warshawsky

Mailing Address 9501 East Shea Blvd

City Scottsdale State AZ Zip Code 85260

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

Name of Employer Caremark Occupation VP Region Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 09 / 2007

Transaction ID: 70329.C23831

Amount of Each Receipt this Period
 50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Lee Warshawsky

Mailing Address 9501 East Shea Blvd

City Scottsdale State AZ Zip Code 85260

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

Name of Employer Caremark Occupation VP Region Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 23 / 2007

Transaction ID: 70329.C24042

Amount of Each Receipt this Period
 50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	135.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) Mark Weeks		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2007	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 70329.C23834	
City Nashville	State TN	Amount of Each Receipt this Period 100.00	
Zip Code 37201-1817		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation SVP Finance Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) Mark Weeks		Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2007	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 70329.C24045	
City Nashville	State TN	Amount of Each Receipt this Period 100.00	
Zip Code 37201-1817		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation SVP Finance Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) Scott Wertz		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2007	
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C23836	
City Northbrook	State IL	Amount of Each Receipt this Period 100.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation VP Product Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Scott Wertz		Date of Receipt MM / DD / YYYY 03 / 23 / 2007
Mailing Address 2211 Sanders Road		Transaction ID: 70329.C24047
City Northbrook	State IL	Zip Code 60062-6150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Caremark	Occupation VP Product Development	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Joseph West		Date of Receipt MM / DD / YYYY 03 / 09 / 2007
Mailing Address 4411 Tweedsmuir Court		Transaction ID: 70329.C23837
City Moseley	State VA	Zip Code 23120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation VP Clinical	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

Full Name (Last, First, Middle Initial) C. Joseph West		Date of Receipt MM / DD / YYYY 03 / 23 / 2007
Mailing Address 4411 Tweedsmuir Court		Transaction ID: 70329.C24048
City Moseley	State VA	Zip Code 23120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation VP Clinical	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	170.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
Terry White

Mailing Address 750 W. John Carpenter Fwy
Suite 1200

City Irving State TX Zip Code 75039-2507

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

Name of Employer Caremark Occupation VP Area Account Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23838

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Terry White

Mailing Address 750 W. John Carpenter Fwy
Suite 1200

City Irving State TX Zip Code 75039-2507

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

Name of Employer Caremark Occupation VP Area Account Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2007

Transaction ID: 70329.C24049

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
C Casey Wilkes

Mailing Address 7034 Alamo Downs Pkwy

City San Antonio State TX Zip Code 78238-4509

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

Name of Employer Caremark Occupation Dir Pharmacy Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2007

Transaction ID: 70329.C23839

Amount of Each Receipt this Period
40.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	194.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

A. Full Name (Last, First, Middle Initial)
C Casey Wilkes

Mailing Address 7034 Alamo Downs Pkwy

City San Antonio State TX Zip Code 78238-4509

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

Name of Employer Caremark Occupation Dir Pharmacy Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
03 / 23 / 2007

Transaction ID: 70329.C24050

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
Eric Yonkus

Mailing Address 5235 Ravenswood #10

City Chicago State IL Zip Code 60640

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

Name of Employer Caremark Occupation Sales Executive Strategic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt
03 / 09 / 2007

Transaction ID: 70329.C23844

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Eric Yonkus

Mailing Address 5235 Ravenswood #10

City Chicago State IL Zip Code 60640

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

Name of Employer Caremark Occupation Sales Executive Strategic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
03 / 23 / 2007

Transaction ID: 70329.C24055

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	110.00
TOTAL This Period (last page this line number only)	13914.00

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

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

FOR LINE NUMBER: (check only one)

PAGE 70 / 75

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

<p>A. Citizens for Altmire</p> <p>Full Name (Last, First, Middle Initial) Citizens for Altmire</p> <p>Mailing Address PO Box 1776</p> <p>City Freedom State PA Zip Code 15042-0176</p> <p>Purpose of Disbursement 03-07-07 EVENT; PA-04 US HOUSE</p> <p>Candidate Name JASON ALTMIRE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 70330.E871</p> <p>Date of Disbursement 03 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>03-07-07 EVENT; PA-04 US HOUSE</p>
---	--	---

<p>B. Texas Freedom Fund</p> <p>Full Name (Last, First, Middle Initial) Texas Freedom Fund</p> <p>Mailing Address 104 Hume Avenue</p> <p>City Alexandria State VA Zip Code 22301-1015</p> <p>Purpose of Disbursement PAC TO JOE BARTON LDR. PAC TX-6</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 70329.E859</p> <p>Date of Disbursement 03 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>PAC TO JOE BARTON LDR. PAC TX-6</p>
--	--	--

<p>C. Marsha Blackburn for Congress</p> <p>Full Name (Last, First, Middle Initial) Marsha Blackburn for Congress</p> <p>Mailing Address PO Box 682185</p> <p>City Franklin State TN Zip Code 37068-2185</p> <p>Purpose of Disbursement 02-27-07 EVENT; TN-7 US HOUSE</p> <p>Candidate Name MARSHA MRS. BLACKBURN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 70329.E860</p> <p>Date of Disbursement 03 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>02-27-07 EVENT; TN-7 US HOUSE</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>7500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 71 / 75

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Burgess for Congress		Transaction ID: 70330.E872 Date of Disbursement 03 / 13 / 2007	
Mailing Address PO Box 2334		Amount of Each Disbursement this Period 3000.00	
City Denton State TX Zip Code 76202-2334	Purpose of Disbursement EVENT TBD; TX-26 US HOUSE	Category/ Type	
Candidate Name MICHAEL C DR BURGESS	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 26	EVENT TBD; TX-26 US HOUSE		

Full Name (Last, First, Middle Initial) B. DAKPAC		Transaction ID: 70329.E861 Date of Disbursement 03 / 07 / 2007	
Mailing Address 120 Maryland Ave NW		Amount of Each Disbursement this Period 2000.00	
City Washington State DC Zip Code 20002-	Purpose of Disbursement PAC TO KENT CONRAD ND LDR. PAC	Category/ Type	
Candidate Name	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	PAC TO KENT CONRAD ND LDR. PAC		

Full Name (Last, First, Middle Initial) C. Texans for Senator John Cornyn		Transaction ID: 70330.E873 Date of Disbursement 03 / 13 / 2007	
Mailing Address 1203 Portner Rd		Amount of Each Disbursement this Period 3000.00	
City Alexandria State VA Zip Code 22314-1316	Purpose of Disbursement 03-01-07 EVENT; TX-US SENATE	Category/ Type	
Candidate Name JOHN CORNYN	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00	03-01-07 EVENT; TX-US SEN- ATE		

SUBTOTAL of Disbursements This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Crowley for Congress		Transaction ID: 70329.E862 Date of Disbursement 03 / 07 / 2007	
Mailing Address 422 C St NE		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20002-5818	Purpose of Disbursement 03-06-07 EVENT; NY-07 US HOUSE	Category/ Type	03-06-07 EVENT; NY-07 US HOUSE
Candidate Name JOSEPH CROWLEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Mike Ferguson		Transaction ID: 70329.E863 Date of Disbursement 03 / 07 / 2007	
Mailing Address PO Box 225		Amount of Each Disbursement this Period 1000.00	
City Colonia State NJ Zip Code 07067-0225	Purpose of Disbursement NJ-07 US HOUSE	Category/ Type	NJ-07 US HOUSE
Candidate Name MIKE FERGUSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. McConnell Senate Committee		Transaction ID: 70329.E864 Date of Disbursement 03 / 07 / 2007	
Mailing Address PO Box 1496		Amount of Each Disbursement this Period 2500.00	
City Louisville State KY Zip Code 40201-1496	Purpose of Disbursement 03-07-07 EVENT; KY-US SENATE	Category/ Type	03-07-07 EVENT; KY-US SEN- ATE
Candidate Name MITCH MCCONNELL	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Jim Ramstad Volunteer Committee		Transaction ID: 70329.E865 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 7
Mailing Address 1809 Plymouth Rd Ste 310B		Amount of Each Disbursement this Period 1000.00
City Hopkins State MN Zip Code 55305-1977	Category/ Type 03-21-07 EVENT; MN-03 US HOUSE	
Purpose of Disbursement 03-21-07 EVENT; MN-03 US HOUSE		
Candidate Name JIM RAMSTAD		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Rangel for US Congress		Transaction ID: 70329.E866 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 7
Mailing Address PO Box 5577 Manhattanville Station		Amount of Each Disbursement this Period 2500.00
City New York State NY Zip Code 10027-5570	Category/ Type 03-01-07 EVENT; NY-15 US HOUSE	
Purpose of Disbursement 03-01-07 EVENT; NY-15 US HOUSE		
Candidate Name CHARLES B RANGEL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Reed Committee		Transaction ID: 70329.E867 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 7
Mailing Address 303 Massachusetts Ave NW 3rd FLR		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002-	Category/ Type 03-07-07 EVENT; RI-US SENATE	
Purpose of Disbursement 03-07-07 EVENT; RI-US SENATE		
Candidate Name JACK REED		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Ryan for Congress		Transaction ID: 70329.E868 Date of Disbursement 03 / 07 / 2007	
Mailing Address PO Box 1919		Amount of Each Disbursement this Period 1000.00	
City Janesville State WI Zip Code 53547-1919	Purpose of Disbursement 03-13-07 EVENT; WI-01 US HOUSE	Category/ Type	
Candidate Name PAUL D RYAN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WI District: 01	03-13-07 EVENT; WI-01 US HOUSE		

Full Name (Last, First, Middle Initial) B. Volunteers for Shimkus		Transaction ID: 70330.E874 Date of Disbursement 03 / 13 / 2007	
Mailing Address PO Box 2776		Amount of Each Disbursement this Period 1000.00	
City Arlington State VA Zip Code 22202-0776	Purpose of Disbursement 03-06-07 EVENT; IL-19 US HOUSE	Category/ Type	
Candidate Name JOHN M SHIMKUS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 19	03-06-07 EVENT; IL-19 US HOUSE		

Full Name (Last, First, Middle Initial) C. Upton for All of Us		Transaction ID: 70330.E875 Date of Disbursement 03 / 13 / 2007	
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 2000.00	
City Alexandria State VA Zip Code 22301-1015	Purpose of Disbursement 03-28-07 EVENT; MI-6 US HOUSE	Category/ Type	
Candidate Name FREDERICK STEPHEN UPTON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MI District: 06	03-28-07 EVENT; MI-6 US HOUSE		

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Caremark Rx Inc. Employees Political Action Committee

Full Name (Last, First, Middle Initial) A. Van Hollen for Congress		Transaction ID: 70329.E870 Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2007
Mailing Address 10605 Concord Street, Suite 202		Amount of Each Disbursement this Period 1000.00
City Kensington State MD Zip Code 20895-2504	03-13-07 EVENT; MD-08 US HOUSE	
Purpose of Disbursement 03-13-07 EVENT; MD-08 US HOUSE		Category/ Type
Candidate Name CHRIS VAN HOLLEN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Van Hollen for Congress		Transaction ID: 70330.E876 Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2007
Mailing Address 10605 Concord Street, Suite 202		Amount of Each Disbursement this Period 1000.00
City Kensington State MD Zip Code 20895-2504	03-06-07 EVENT; MD-08 US HOUSE	
Purpose of Disbursement 03-06-07 EVENT; MD-08 US HOUSE		Category/ Type
Candidate Name CHRIS VAN HOLLEN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

30500.00