

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 08 01 2006 through 08 31 2006

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 09 18 2006

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	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		355624.00
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	274213.00									
(c) Total Receipts (from Line 19)	18694.00	157283.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	292907.00	512907.00								
7. Total Disbursements (from Line 31)	40800.00	260800.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	252107.00	252107.00								
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	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	17784.00	125688.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	910.00	31595.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	18694.00	157283.00
(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)	18694.00	157283.00
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))	18694.00	157283.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18694.00	157283.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24000.00	214000.00
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.....	16800.00	46800.00
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))..	40800.00	260800.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	40800.00	260800.00

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)	18694.00	157283.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18694.00	157283.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 / 131
<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

Full Name (Last, First, Middle Initial) A. Lora Armstrong		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 11120110	
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 Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00		

Full Name (Last, First, Middle Initial) B. Lora Armstrong		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12120187	
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 Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00		

Full Name (Last, First, Middle Initial) C. Kray Arnold		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 9501 E Shea Blvd		Transaction ID: 11120111	
City State Zip Code Scottsdale AZ 85260-6719	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation MGR IT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00		

SUBTOTAL of Receipts This Page (optional) ▶	105.00
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 7 / 131
	<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. Kray Arnold		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 9501 E Shea Blvd		Transaction ID: 12120188	
City State Zip Code Scottsdale AZ 85260-6719	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation MGR IT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00		

Full Name (Last, First, Middle Initial) B. Loretta Katherine Ashby		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 2211 Sanders Road 6th Floor		Transaction ID: 12119665	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) C. Loretta Katherine Ashby		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 2211 Sanders Road 6th Floor		Transaction ID: 12119880	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

SUBTOTAL of Receipts This Page (optional) ▶	75.00
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 8 / 131
	<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)
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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12119666

Amount of Each Receipt this Period
77.00

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12119881

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Neal Baker

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 11120112

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 9 / 131
	<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. Neal Baker		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 12120189
City Northbrook State IL Zip Code 60062-6150	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 77.00
Name of Employer Caremark Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 1309.00		

Full Name (Last, First, Middle Initial) B. Robert Baldino		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 12119668
City Northbrook State IL Zip Code 60062-6150	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 77.00
Name of Employer Caremark Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 1232.00		

Full Name (Last, First, Middle Initial) C. Robert Baldino		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 12119883
City Northbrook State IL Zip Code 60062-6150	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 77.00
Name of Employer Caremark Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 1309.00		

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 10 / 131
	<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. Lauren Baldwin		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 1300 I Street NW Suite 525 West		Transaction ID: 11120113	
City Washington	State DC	Amount of Each Receipt this Period 25.00	
Zip Code 20005		Receipt	
FEC ID number of contributing federal political committee. C			
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 ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Lauren Baldwin		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 1300 I Street NW Suite 525 West		Transaction ID: 12120190	
City Washington	State DC	Amount of Each Receipt this Period 25.00	
Zip Code 20005		Receipt	
FEC ID number of contributing federal political committee. C			
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 ▼ 425.00		

Full Name (Last, First, Middle Initial) C. Robert Banuelos		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 15803 Strickland Court		Transaction ID: 12119670	
City Charlotte	State NC	Amount of Each Receipt this Period 35.00	
Zip Code 28277		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00		

SUBTOTAL of Receipts This Page (optional) ▶	85.00
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 / 131
	<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 Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119885

Amount of Each Receipt this Period
35.00

Receipt

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

Mailing Address 2211 Sanders Road
10th Floor

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation SVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2080.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 11120115

Amount of Each Receipt this Period
130.00

Receipt

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

Mailing Address 2211 Sanders Road
10th Floor

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation SVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2210.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120192

Amount of Each Receipt this Period
130.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	295.00
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 / 131
	<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. H Bessant		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119674	
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 CONSUMER PROGRAMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00		

Full Name (Last, First, Middle Initial) B. H Bessant		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119889	
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 CONSUMER PROGRAMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00		

Full Name (Last, First, Middle Initial) C. Steven Blake		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 5607 Glenridge Drive Suite 300		Transaction ID: 12119675	
City State Zip Code Atlanta GA 30342	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SR SALES CONSULTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	105.00
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 13 / 131
	<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. Steven Blake		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 5607 Glenridge Drive Suite 300		Transaction ID: 12119890
City Atlanta State GA Zip Code 30342	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation SR SALES CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) B. Lawrence Blandford		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 1306 Highland Ave		Transaction ID: 12119676
City Louisville State KY Zip Code 40204	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation ACCOUNT MANAGEMENT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Lawrence Blandford		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 1306 Highland Ave		Transaction ID: 12119891
City Louisville State KY Zip Code 40204	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation ACCOUNT MANAGEMENT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional) ▶	65.00
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 14 / 131
	(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. Beth Bly		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 5607 Glenridge Drive Suite 300		Transaction ID: 12119677
City Atlanta State GA Zip Code 30342	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation ACCOUNT MANAGEMENT ANALYST	Aggregate Year-to-Date ▼ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Beth Bly		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 5607 Glenridge Drive Suite 300		Transaction ID: 12119892
City Atlanta State GA Zip Code 30342	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation ACCOUNT MANAGEMENT ANALYST	Aggregate Year-to-Date ▼ 255.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Scott Bond		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 750 W John Carpenter Fwy Suite 1200		Transaction ID: 11120116
City Irving State TX Zip Code 75039-2507	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation VP ACCOUNT MANAGEMENT	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	55.00
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 / 131
	<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)
Scott Bond

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 ACCOUNT MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2006

Transaction ID: 12120193

Amount of Each Receipt this Period
25.00

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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12120118

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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2006

Transaction ID: 12120195

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	95.00
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 / 131
	<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)
Joanne Carlson

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120121

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joanne Carlson

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120198

Amount of Each Receipt this Period
35.00

Receipt

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

Mailing Address 2211 Sanders Road
5th Floor

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12119688

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 131
	<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. Robert Cascarano		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 2211 Sanders Road 5th Floor		Transaction ID: 12119903	
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation Manager	Aggregate Year-to-Date ▼ 220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Peter Clemens		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 12119689	
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 EVP CHIEF FINANCIAL OFFICER	Aggregate Year-to-Date ▼ 1600.00		
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 0 8 / 2 5 / 2 0 0 6	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 12119904	
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 EVP CHIEF FINANCIAL OFFICER	Aggregate Year-to-Date ▼ 1700.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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 18 / 131
	<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. Steven Covett		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 5904 Downington PI NW		Transaction ID: 12119692	
City State Zip Code Acworth GA 30101-8480	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation DIR REGIONAL CLINICAL CONSULTI		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00		

Full Name (Last, First, Middle Initial) B. Steven Covett		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 5904 Downington PI NW		Transaction ID: 12119907	
City State Zip Code Acworth GA 30101-8480	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation DIR REGIONAL CLINICAL CONSULTI		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00		

Full Name (Last, First, Middle Initial) C. Andrew Crawford		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 12120122	
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 SR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00		

SUBTOTAL of Receipts This Page (optional) ▶	220.00
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 19 / 131
	<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. Andrew Crawford		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 12120199
City Nashville	State TN	Zip Code 37201-1817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Caremark	Occupation SR VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2550.00	

Full Name (Last, First, Middle Initial) B. Edwin Crawford		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 12120123
City Nashville	State TN	Zip Code 37201-1817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Caremark	Occupation CHAIRMAN & CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Edwin Crawford		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 12120200
City Nashville	State TN	Zip Code 37201-1817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Caremark	Occupation CHAIRMAN & CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3200.00	

SUBTOTAL of Receipts This Page (optional)	▶	550.00
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 / 131
	<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. Ronald Crenshaw		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12120124	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) B. Ronald Crenshaw		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12120201	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) C. Kenneth Czarnecki		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 12119696	
City State Zip Code Irving TX 75039	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SVP PHARMACIES AND SERVICE CEN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00		

SUBTOTAL of Receipts This Page (optional) ▶	140.00
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 21 / 131
	<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. Kenneth Czarnecki		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 12119911	
City Irving	State TX	Zip Code 75039	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SVP PHARMACIES AND SERVICE GEN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00		

Full Name (Last, First, Middle Initial) B. Yolanda Daniel		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 2211 Sanders Road		Transaction ID: 12120125	
City Northbrook	State IL	Zip Code 60062-6150	Amount of Each Receipt this Period 85.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1360.00		

Full Name (Last, First, Middle Initial) C. Yolanda Daniel		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 2211 Sanders Road		Transaction ID: 12120202	
City Northbrook	State IL	Zip Code 60062-6150	Amount of Each Receipt this Period 85.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1445.00		

SUBTOTAL of Receipts This Page (optional) ▶	270.00
TOTAL This Period (last page this line number only) ▶	(Empty field)

**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 / 131
	<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 08 / 11 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12120126	
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 Director	Aggregate Year-to-Date ▼ 640.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. James Dixon		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12120203	
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 Director	Aggregate Year-to-Date ▼ 680.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. John Dorman		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 12119699	
City State Zip Code Irving TX 75039	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark Occupation DIR CLIENT SERVICES	Aggregate Year-to-Date ▼ 320.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	100.00
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 / 131
	<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. John Dorman		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 12119914
City Irving State TX Zip Code 75039	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation DIR CLIENT SERVICES	Aggregate Year-to-Date ▼ 340.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Philip Ellison Jr		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 12120127
City Irving State TX Zip Code 75039	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation AVP HUMAN RESOURCES	Aggregate Year-to-Date ▼ 560.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Philip Ellison Jr		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 12120204
City Irving State TX Zip Code 75039	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation AVP HUMAN RESOURCES	Aggregate Year-to-Date ▼ 595.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 131
	<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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119701

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2006

Transaction ID: 12119916

Amount of Each Receipt this Period
40.00

Receipt

C. Full Name (Last, First, Middle Initial)
A 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 DIR ACCOUNT MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119702

Amount of Each Receipt this Period
25.00

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 / 131
	<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. A Faudskar		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119917
City Scottsdale	State AZ	Zip Code 85260
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Caremark	Occupation DIR ACCOUNT MANAGEMENT	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) B. Tracy Fields		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address P. O. Box 6634		Transaction ID: 12120128
City Lees Summit	State MO	Zip Code 64064
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Caremark	Occupation Manager	Receipt
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) C. Tracy Fields		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address P. O. Box 6634		Transaction ID: 12120205
City Lees Summit	State MO	Zip Code 64064
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Caremark	Occupation Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 131
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Michael Fieri

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 SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1280.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119705

Amount of Each Receipt this Period
80.00

Receipt

B. Full Name (Last, First, Middle Initial)
Michael Fieri

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 SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1360.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2006

Transaction ID: 12119920

Amount of Each Receipt this Period
80.00

Receipt

C. Full Name (Last, First, Middle Initial)
Sara Finley

Mailing Address 211 Commerce Street Suite 800

City State Zip Code
Nashville TN 37201-1817

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

Name of Employer Caremark Occupation SVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12120129

Amount of Each Receipt this Period
100.00

Receipt

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 27 / 131
	<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)
Sara Finley

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120206

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Brian Fleming

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 PROJECT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 12120130

Amount of Each Receipt this Period
20.00

Receipt

C. Full Name (Last, First, Middle Initial)
Brian Fleming

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 PROJECT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120207

Amount of Each Receipt this Period
20.00

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 28 / 131
	<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)
Dora Folden

Mailing Address 6817 Woodmere Drive

City State Zip Code
Riverside CA 92509

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

Name of Employer Caremark Occupation Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119708

Amount of Each Receipt this Period
15.00

Receipt

B. Full Name (Last, First, Middle Initial)
Dora Folden

Mailing Address 6817 Woodmere Drive

City State Zip Code
Riverside CA 92509

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

Name of Employer Caremark Occupation Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2006

Transaction ID: 12119923

Amount of Each Receipt this Period
15.00

Receipt

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

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 DIR PHARMACY RESOURCE CENTER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119709

Amount of Each Receipt this Period
40.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	70.00
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 29 / 131
	(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. Christopher Freed		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119924	
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 DIR PHARMACY RESOURCE CENTER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00		

Full Name (Last, First, Middle Initial) B. Jane Freyer		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12119710	
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 Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00		

Full Name (Last, First, Middle Initial) C. Jane Freyer		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12119925	
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 Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00		

SUBTOTAL of Receipts This Page (optional) ▶	110.00
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 30 / 131
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Joan Gallagher

Mailing Address 211 Commerce Street
Suite 800

City State Zip Code
Nashville TN 37201-1817

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

Name of Employer Occupation
Caremark SR VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	1	/	2	0	0	6

Transaction ID: 12120131

Amount of Each Receipt this Period
125.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joan Gallagher

Mailing Address 211 Commerce Street
Suite 800

City State Zip Code
Nashville TN 37201-1817

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

Name of Employer Occupation
Caremark SR VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2125.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	0	6

Transaction ID: 12120208

Amount of Each Receipt this Period
125.00

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 Occupation
Caremark VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 560.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	1	/	2	0	0	6

Transaction ID: 12120132

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **285.00**

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 / 131
	<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. Joseph Gallo		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 5480 Sunstone Lane		Transaction ID: 12120209
City State Zip Code Castle Rock CO 80104	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00
Name of Employer Caremark	Occupation VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00	

Full Name (Last, First, Middle Initial) B. Catherine Gaudio		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119714
City State Zip Code Scottsdale AZ 85260	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer Caremark	Occupation MGR CLIENT SERVICES	Receipt
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) C. Catherine Gaudio		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119929
City State Zip Code Scottsdale AZ 85260	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer Caremark	Occupation MGR CLIENT SERVICES	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

SUBTOTAL of Receipts This Page (optional)	▶	85.00
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 / 131
	<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)
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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119716

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2006

Transaction ID: 12119931

Amount of Each Receipt this Period
35.00

Receipt

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

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 PHARMACY OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119717

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 131
	<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)
Thomas Gibbons

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 PHARMACY OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119932

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jack Gierat

Mailing Address 2714 North Magnolia #1F

City State Zip Code
Chicago IL 60614

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12119718

Amount of Each Receipt this Period
15.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jack Gierat

Mailing Address 2714 North Magnolia #1F

City State Zip Code
Chicago IL 60614

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119933

Amount of Each Receipt this Period
15.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	50.00
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 / 131
	<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)
Gregory Gierwielaniec

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12119719

Amount of Each Receipt this Period
20.00

Receipt

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119934

Amount of Each Receipt this Period
20.00

Receipt

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12120133

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	117.00
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 35 / 131
	<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)
Michael Gill

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120210

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Thomas Godfrey

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 AVP MATERIALS MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12119721

Amount of Each Receipt this Period
20.00

Receipt

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

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 AVP MATERIALS MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12119936

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	117.00
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 36 / 131
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Mailing Address 2211 Sanders Road
10th Floor

City State Zip Code
Northbrook IL 60062-2507

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

Name of Employer Caremark Occupation SVP SPECIALTY PHARMACY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2160.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119723

Amount of Each Receipt this Period
135.00

Receipt

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

Mailing Address 2211 Sanders Road
10th Floor

City State Zip Code
Northbrook IL 60062-2507

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

Name of Employer Caremark Occupation SVP SPECIALTY PHARMACY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2295.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2006

Transaction ID: 12119938

Amount of Each Receipt this Period
135.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gerard Greene

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12120135

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	305.00
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 37 / 131
	(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)
Gerard Greene

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120212

Amount of Each Receipt this Period
35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Domenico Gugliuzza

Mailing Address 11311 McCormick Road
Building 75, Suite 230

City State Zip Code
Hunt Valley MD 21031-1002

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

Name of Employer Caremark Occupation AVP REBATES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12119726

Amount of Each Receipt this Period
25.00

Receipt

C. Full Name (Last, First, Middle Initial)
Domenico Gugliuzza

Mailing Address 11311 McCormick Road
Building 75, Suite 230

City State Zip Code
Hunt Valley MD 21031-1002

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

Name of Employer Caremark Occupation AVP REBATES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119941

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	85.00
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 / 131
	<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 E Hahn-Lowry

Mailing Address 16674 W Roosevelt St

City State Zip Code
Goodyear AZ 85338-6194

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

Name of Employer Caremark Occupation AVP TRADE RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119727

Amount of Each Receipt this Period
15.00

Receipt

B. Full Name (Last, First, Middle Initial)
Robert E Hahn-Lowry

Mailing Address 16674 W Roosevelt St

City State Zip Code
Goodyear AZ 85338-6194

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

Name of Employer Caremark Occupation AVP TRADE RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2006

Transaction ID: 12119942

Amount of Each Receipt this Period
15.00

Receipt

C. Full Name (Last, First, Middle Initial)
Renee Hammons

Mailing Address 5177 Kimbark Woods

City State Zip Code
Memphis TN 38134

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

Name of Employer Caremark Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119729

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	50.00
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 / 131
	<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)
Renee Hammons

Mailing Address 5177 Kimbark Woods

City State Zip Code
Memphis TN 38134

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

Name of Employer Caremark Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119944

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Edward Hardin

Mailing Address 211 Commerce Street Suite 800

City State Zip Code
Nashville TN 37201-1817

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

Name of Employer Caremark Occupation EVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2160.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 11120090

Amount of Each Receipt this Period
135.00

Receipt

C. Full Name (Last, First, Middle Initial)
Edward Hardin

Mailing Address 211 Commerce Street Suite 800

City State Zip Code
Nashville TN 37201-1817

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

Name of Employer Caremark Occupation EVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2295.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120091

Amount of Each Receipt this Period
135.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	290.00
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 / 131
	<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. Stephen Haught		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12119731	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation AVP CLIENT SERVICES		
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. Stephen Haught		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12119946	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation AVP CLIENT SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

Full Name (Last, First, Middle Initial) C. Robert Heglin		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119732	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation AVP ASSISTANT GENERAL COUNSEL		
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) ▶	65.00
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 41 / 131
	(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. Robert Heglin		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119947	
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark	Occupation AVP ASSISTANT GENERAL COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

Full Name (Last, First, Middle Initial) B. James Hogan		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 6466 N. Northwest Highway Apt D-2		Transaction ID: 12119736	
City State Zip Code Chicago IL 60631	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark	Occupation Account Executive		
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. James Hogan		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 6466 N. Northwest Highway Apt D-2		Transaction ID: 12119951	
City State Zip Code Chicago IL 60631	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark	Occupation Account Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

SUBTOTAL of Receipts This Page (optional) ▶	45.00
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 42 / 131
	<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)
Eddie Holmes

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 DIR IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120140

Amount of Each Receipt this Period
35.00

Receipt

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

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 DIR IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120217

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Peter Horn

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 Senior Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120141

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **90.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 131
	<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) Peter Horn		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 750 W John Carpenter Fwy Suite 1200		Transaction ID: 12120218	
City Irving	State TX	Amount of Each Receipt this Period 20.00	
Zip Code 75039-2507		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation Senior Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

B. Full Name (Last, First, Middle Initial) Dustin Humphreys		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 12120142	
City Irving	State TX	Amount of Each Receipt this Period 25.00	
Zip Code 75039		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation DIR PHARMACY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) Dustin Humphreys		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 12120219	
City Irving	State TX	Amount of Each Receipt this Period 25.00	
Zip Code 75039		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation DIR PHARMACY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

SUBTOTAL of Receipts This Page (optional) ▶	70.00
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 / 131
	<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)
Constance Isley

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 1119740

Amount of Each Receipt this Period
77.00

Receipt

B. Full Name (Last, First, Middle Initial)
Constance Isley

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12119955

Amount of Each Receipt this Period
77.00

Receipt

C. 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 OPERATIONS INTEGRATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120143

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 45 / 131
	<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 OPERATIONS INTEGRATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120220

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
Michael Jaeger

Mailing Address 35 Highland Road Suite 3403

City State Zip Code
Bethel Park PA 15102

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

Name of Employer Caremark Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 11119742

Amount of Each Receipt this Period
15.00

Receipt

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

Mailing Address 35 Highland Road Suite 3403

City State Zip Code
Bethel Park PA 15102

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

Name of Employer Caremark Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119957

Amount of Each Receipt this Period
15.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	70.00
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 / 131
	<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)
Barry Jasilli

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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
192.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	0	6

Transaction ID: 11119745

Amount of Each Receipt this Period
12.00

Receipt

B. Full Name (Last, First, Middle Initial)
Barry Jasilli

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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	0	6

Transaction ID: 12119960

Amount of Each Receipt this Period
12.00

Receipt

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

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 EVP SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2160.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	0	6

Transaction ID: 11119747

Amount of Each Receipt this Period
135.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	159.00
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 / 131
	<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)
John David Joyner

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 EVP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2295.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119962

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2160.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 11119749

Amount of Each Receipt this Period
135.00

Receipt

C. 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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2295.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119964

Amount of Each Receipt this Period
135.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	405.00
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 / 131
	<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)
Kelly Katch

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 MGR IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 1119751

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kelly Katch

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 MGR IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12119966

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 2211 Sanders Road
5th Floor

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120145

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 / 131
	<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. Christopher Kidd		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 2211 Sanders Road 5th Floor		Transaction ID: 12120222	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation Caremark Analyst	Aggregate Year-to-Date ▼ 340.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Geoffrey Kilgore		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 5607 Glenridge Drive Suite 300		Transaction ID: 11119754	
City State Zip Code Atlanta GA 30342	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation Caremark VP SALES	Aggregate Year-to-Date ▼ 1220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Geoffrey Kilgore		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 5607 Glenridge Drive Suite 300		Transaction ID: 12119968	
City State Zip Code Atlanta GA 30342	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Occupation Caremark VP SALES	Aggregate Year-to-Date ▼ 1300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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 50 / 131
	<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. James King		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12120146	
City State Zip Code Scottsdale AZ 85260	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 SERVICES	Aggregate Year-to-Date ▼ 1232.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. James King		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12120223	
City State Zip Code Scottsdale AZ 85260	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 SERVICES	Aggregate Year-to-Date ▼ 1309.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Daniel Kline		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2700 Milan Court		Transaction ID: 12120147	
City State Zip Code Birmingham AL 35211	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark Occupation VP PHARMACY OPS	Aggregate Year-to-Date ▼ 320.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	174.00
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 51 / 131
	(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)
Daniel Kline

Mailing Address 2700 Milan Court

City Birmingham State AL Zip Code 35211

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

Name of Employer Caremark Occupation VP PHARMACY OPS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120224

Amount of Each Receipt this Period
 20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kelli Kovak

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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 11119758

Amount of Each Receipt this Period
 35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Kelli Kovak

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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 12119972

Amount of Each Receipt this Period
 35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 131
	<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)
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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2006

Transaction ID: 11119759

Amount of Each Receipt this Period
77.00

Receipt

B. 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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2006

Transaction ID: 12119973

Amount of Each Receipt this Period
77.00

Receipt

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

Mailing Address 2211 Sanders Road
8th Floor

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2006

Transaction ID: 11119760

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	174.00
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 53 / 131
	<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)
John Kueter

Mailing Address 2211 Sanders Road
8th Floor

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12119974

Amount of Each Receipt this Period
20.00

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 Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 11119761

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 Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12119975

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 131
	<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)
Timothy Kurth

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120148

Amount of Each Receipt this Period
35.00

Receipt

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120225

Amount of Each Receipt this Period
35.00

Receipt

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

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 MAIL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1280.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120149

Amount of Each Receipt this Period
80.00

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: (check only one)	PAGE 55 / 131
	<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)
James Lewis

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 MAIL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1360.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120226

Amount of Each Receipt this Period
80.00

Receipt

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 11119765

Amount of Each Receipt this Period
40.00

Receipt

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12119979

Amount of Each Receipt this Period
40.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	160.00
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 56 / 131						
	(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. Jason Lindas		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address 2211 Sanders Road 4th Floor		Transaction ID: 11119767
City Northbrook	State IL	Zip Code 60062-6150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Caremark	Occupation Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) B. Jason Lindas		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 2211 Sanders Road 4th Floor		Transaction ID: 12119981
City Northbrook	State IL	Zip Code 60062-6150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Caremark	Occupation Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Diane Linker		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address 669 Western Lane		Transaction ID: 11119770
City Addison	State IL	Zip Code 60101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Caremark	Occupation Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 / 131
	<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)
Diane Linker

Mailing Address 669 Western Lane

City Addison State IL Zip Code 60101

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 12119984

Amount of Each Receipt this Period
 20.00

Receipt

B. Full Name (Last, First, Middle Initial)
J. Chris 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 SR VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 11119771

Amount of Each Receipt this Period
 100.00

Receipt

C. Full Name (Last, First, Middle Initial)
J. Chris 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 SR VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 12119985

Amount of Each Receipt this Period
 100.00

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 58 / 131
	<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

Full Name (Last, First, Middle Initial) A. Bruce Lyons		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12120151	
City Northbrook	State IL	Zip Code 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 SR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1232.00		

Full Name (Last, First, Middle Initial) B. Bruce Lyons		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12120228	
City Northbrook	State IL	Zip Code 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 SR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1309.00		

Full Name (Last, First, Middle Initial) C. Bruce MacRae		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 11119773	
City Northbrook	State IL	Zip Code 60062-6150	Amount of Each Receipt this Period 55.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation AVP SALES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00		

SUBTOTAL of Receipts This Page (optional) ▶	209.00
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 59 / 131
	<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 MacRae

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 AVP SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119987

Amount of Each Receipt this Period
55.00

Receipt

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

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 VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 11119774

Amount of Each Receipt this Period
77.00

Receipt

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

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 VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119988

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 60 / 131
	<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)
James Margiotta

Mailing Address 34 South Berryline Circle

City State Zip Code
Spring TX 77381

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

Name of Employer Caremark Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 1119776

Amount of Each Receipt this Period
77.00

Receipt

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

Mailing Address 34 South Berryline Circle

City State Zip Code
Spring TX 77381

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

Name of Employer Caremark Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 1219990

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Andrea Marks

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 Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120152

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	179.00
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 / 131
	<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)
Andrea Marks

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 Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120229

Amount of Each Receipt this Period
25.00

Receipt

B. Full Name (Last, First, Middle Initial)
Deanna McFadden

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 11119780

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Deanna McFadden

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12119994

Amount of Each Receipt this Period
77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	179.00
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 / 131
	<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 ENGINEERING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 11119781

Amount of Each Receipt this Period
35.00

Receipt

B. 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 ENGINEERING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12119995

Amount of Each Receipt this Period
35.00

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 AVP BUSINESS DEVELOPMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 11119783

Amount of Each Receipt this Period
77.00

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 63 / 131
	<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. Phillip Mcleod		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 12119997	
City Irving State TX Zip Code 75039	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation AVP BUSINESS DEVELOPMENT	Aggregate Year-to-Date ▼ 1309.00		
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 0 8 / 1 1 / 2 0 0 6	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 11119784	
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 ▼ 2400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Howard McLure		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 12119998	
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 ▼ 2550.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	377.00
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 64 / 131
	(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. Glenn McRae		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2017 Brook Highland Ridge		Transaction ID: 11119785	
City State Zip Code Birmingham AL 35242	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark	Occupation VP	Aggregate Year-to-Date ▼ 480.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Glenn McRae		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 2017 Brook Highland Ridge		Transaction ID: 12119999	
City State Zip Code Birmingham AL 35242	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark	Occupation VP	Aggregate Year-to-Date ▼ 510.00	
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 08 / 11 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 11119786	
City State Zip Code Scottsdale AZ 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 TECHNOLOGY	Aggregate Year-to-Date ▼ 2400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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 65 / 131
	<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. Ronald Merlino		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12120000	
City State Zip Code Scottsdale AZ 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 TECHNOLOGY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2550.00		

Full Name (Last, First, Middle Initial) B. David Mesick		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 5701 Green Valley Drive		Transaction ID: 11119787	
City State Zip Code Minneapolis MN 55437	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SR SALES CONSULTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) C. David Mesick		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 5701 Green Valley Drive		Transaction ID: 12120001	
City State Zip Code Minneapolis MN 55437	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SR SALES CONSULTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

SUBTOTAL of Receipts This Page (optional) ▶	190.00
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 / 131		
	<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

A. Full Name (Last, First, Middle Initial)
John Miles

Mailing Address 4703 Grand Deli Drive

City State Zip Code
Crestwood KY 40014

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

Name of Employer Caremark Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12120153

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 4703 Grand Deli Drive

City State Zip Code
Crestwood KY 40014

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

Name of Employer Caremark Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120230

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 9150 West 131st Street

City State Zip Code
Shawnee Mission KS 66213

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

Name of Employer Caremark Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12120154

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 67 / 131
	(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. David Milligan		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 9150 West 131st Street		Transaction ID: 12120231	
City State Zip Code Shawnee Mission KS 66213	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Manager	Aggregate Year-to-Date ▼ 340.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Glenn Mitchell		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 2211 Sanders Road		Transaction ID: 12120155	
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 Director	Aggregate Year-to-Date ▼ 560.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Glenn Mitchell		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 2211 Sanders Road		Transaction ID: 12120232	
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 Director	Aggregate Year-to-Date ▼ 595.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 131
	<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. Rudy Mladenovic		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 11119791
City Irving State TX Zip Code 75039		Amount of Each Receipt this Period 192.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation SVP TRADE RELATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3072.00	

Full Name (Last, First, Middle Initial) B. Rudy Mladenovic		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 750 W. John Carpenter Fwy. Suite 1200		Transaction ID: 12120005
City Irving State TX Zip Code 75039		Amount of Each Receipt this Period 192.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation SVP TRADE RELATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3264.00	

Full Name (Last, First, Middle Initial) C. David Mohs		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 2211 Sanders Road 6th Floor		Transaction ID: 11119792
City Northbrook State IL Zip Code 60062-6150		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional) ▶	404.00
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 69 / 131
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Mailing Address 2211 Sanders Road
6th Floor

City State Zip Code
Northbrook IL 60062-6150

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

Name of Employer Caremark Occupation Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120006

Amount of Each Receipt this Period
20.00

Receipt

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

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 MEDICAL AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 12120156

Amount of Each Receipt this Period
50.00

Receipt

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

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 MEDICAL AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120233

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 131
	<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

Full Name (Last, First, Middle Initial) A. Michael Niebaum		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address 10513 Hidden Oaks Lans North		Transaction ID: 1119795
City State Zip Code Champlin MN 55316	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer Caremark	Occupation Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) B. Michael Niebaum		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 10513 Hidden Oaks Lans North		Transaction ID: 12120009
City State Zip Code Champlin MN 55316	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer Caremark	Occupation Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Diane Nobles		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 12120157
City State Zip Code Northbrook IL 60062-6150	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 192.00
Name of Employer Caremark	Occupation EVP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3072.00	

SUBTOTAL of Receipts This Page (optional)	▶	232.00
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 71 / 131
	<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. Diane Nobles		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 2211 Sanders Road 10th Floor		Transaction ID: 12120234	
City Northbrook	State IL	Amount of Each Receipt this Period 192.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation EVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3264.00		

Full Name (Last, First, Middle Initial) B. Joan ORourke		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 2211 Sanders Road 6th Floor		Transaction ID: 12120158	
City Northbrook	State IL	Amount of Each Receipt this Period 20.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) C. Joan ORourke		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 2211 Sanders Road 6th Floor		Transaction ID: 12120235	
City Northbrook	State IL	Amount of Each Receipt this Period 20.00	
Zip Code 60062-6150		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Caremark	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

SUBTOTAL of Receipts This Page (optional) ▶	232.00
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 72 / 131
	<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)
Allen Oden

Mailing Address 2211 Sanders Road
5th Floor

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120159

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Allen Oden

Mailing Address 2211 Sanders Road
5th Floor

City Northbrook State IL Zip Code 60062-6150

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120236

Amount of Each Receipt this Period
20.00

Receipt

C. Full Name (Last, First, Middle Initial)
Lora Parnell

Mailing Address 82 Pebble Beach Drive

City Little Rock State AR Zip Code 72212

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12119801

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	65.00
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 73 / 131
	<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)
Lora Parnell

Mailing Address 82 Pebble Beach Drive

City State Zip Code
Little Rock AR 72212

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

Name of Employer Caremark Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120015

Amount of Each Receipt this Period
25.00

Receipt

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

Mailing Address 4240 Harpers Ferry Circle

City State Zip Code
Birmingham AL 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 ▼ 560.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12119803

Amount of Each Receipt this Period
35.00

Receipt

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

Mailing Address 4240 Harpers Ferry Circle

City State Zip Code
Birmingham AL 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 ▼ 595.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120017

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	95.00
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 74 / 131
	<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. Kevin Plunkett		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12119805	
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 Director	Aggregate Year-to-Date ▼ 560.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Kevin Plunkett		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12120019	
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 Director	Aggregate Year-to-Date ▼ 595.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Patricia Ponczkowski		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2211 Sanders Road 7th Floor		Transaction ID: 12119807	
City State Zip Code Northbrook IL 60062-6150	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Caremark Occupation Senior Manager	Aggregate Year-to-Date ▼ 320.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 131
	<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. Patricia Ponczkowski		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 2211 Sanders Road 7th Floor		Transaction ID: 12120021	
City State Zip Code Northbrook IL 60062-6150		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation Senior Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) B. Natalie Pons		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119808	
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 Advanced PCS Occupation VP BUS PRACTICES & COMPLIANCE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) C. Natalie Pons		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12120022	
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 Advanced PCS Occupation VP BUS PRACTICES & COMPLIANCE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 850.00	

SUBTOTAL of Receipts This Page (optional) ▶	120.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 131
	<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)
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 ▼ 1232.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12119809

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 ▼ 1309.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120023

Amount of Each Receipt this Period
77.00

Receipt

C. Full Name (Last, First, Middle Initial)
Rajiv Ranjan

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12119810

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 77 / 131
	<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. Rajiv Ranjan		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 2211 Sanders Road		Transaction ID: 12120024	
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 Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00		

Full Name (Last, First, Middle Initial) B. John Scott Reid		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 20 Vose Hill Road		Transaction ID: 12120161	
City State Zip Code Westford MA 01886	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1232.00		

Full Name (Last, First, Middle Initial) C. John Scott Reid		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 20 Vose Hill Road		Transaction ID: 12120238	
City State Zip Code Westford MA 01886	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1309.00		

SUBTOTAL of Receipts This Page (optional) ▶	189.00
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 78 / 131
	<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)
Dina Reynolds

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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 12120162

Amount of Each Receipt this Period
 35.00

Receipt

B. Full Name (Last, First, Middle Initial)
Dina Reynolds

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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120239

Amount of Each Receipt this Period
 35.00

Receipt

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

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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 12119815

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 79 / 131
	<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)
Stephen Rill

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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120029

Amount of Each Receipt this Period
 35.00

Receipt

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

Mailing Address 1300 I Street NW Suite 525 West

City Washington State DC Zip Code 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 ▼ 3072.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 12119816

Amount of Each Receipt this Period
 192.00

Receipt

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

Mailing Address 1300 I Street NW Suite 525 West

City Washington State DC Zip Code 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 ▼ 3264.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120030

Amount of Each Receipt this Period
 192.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	419.00
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 80 / 131
	<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. Richard Riva		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 250 Old Wilson Bridge Road Suite 122		Transaction ID: 12119817
City Columbus State OH Zip Code 43085-2215	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SR SALES CONSULTANT	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Riva		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 250 Old Wilson Bridge Road Suite 122		Transaction ID: 12120031
City Columbus State OH Zip Code 43085-2215	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation SR SALES CONSULTANT	Aggregate Year-to-Date ▼ 425.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ellen Robitaille		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 133 Granite St		Transaction ID: 12119818
City Medfield State MA Zip Code 02052	Amount of Each Receipt this Period 21.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark Occupation DIR ACCOUNT MANAGEMENT	Aggregate Year-to-Date ▼ 336.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	71.00
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 81 / 131
	<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)
Ellen Robitaille

Mailing Address 133 Granite St

City State Zip Code
Medfield MA 02052

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

Name of Employer Caremark Occupation DIR ACCOUNT MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 357.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120032

Amount of Each Receipt this Period
 21.00

Receipt

B. Full Name (Last, First, Middle Initial)
Michael Rushnak

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 AVP MEDICAL AFFAIRS/MED DIR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 12119876

Amount of Each Receipt this Period
 20.00

Receipt

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

Mailing Address 4850 Natomas Blvd #1422

City State Zip Code
Sacramento CA 95835

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

Name of Employer Caremark Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 12120164

Amount of Each Receipt this Period
 40.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	81.00
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 82 / 131
	(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. Joel Saban		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 12119821
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	Aggregate Year-to-Date ▼ 640.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joel Saban		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 12120035
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	Aggregate Year-to-Date ▼ 680.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Henry Salvadori		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119822
City State Zip Code Scottsdale AZ 85260	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation AVP CLINICAL SERVICES	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 83 / 131
	<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)
Henry Salvadori

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 AVP CLINICAL SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120036

Amount of Each Receipt this Period
25.00

Receipt

B. Full Name (Last, First, Middle Initial)
Michael Sarocka

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260-6719

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

Name of Employer Caremark Occupation CLINICAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120166

Amount of Each Receipt this Period
25.00

Receipt

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

Mailing Address 9501 East Shea Blvd

City State Zip Code
Scottsdale AZ 85260-6719

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

Name of Employer Caremark Occupation CLINICAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120242

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 131
	<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. Thomas Sarro		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 7034 Alamo Downs Pkwy		Transaction ID: 12119825
City State Zip Code San Antonio TX 78238-4509	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer Caremark	Occupation VP GENERAL MANAGER	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) B. Thomas Sarro		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 7034 Alamo Downs Pkwy		Transaction ID: 12120039
City State Zip Code San Antonio TX 78238-4509	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer Caremark	Occupation VP GENERAL MANAGER	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Steven Schaper		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 8 White Birch Terrace		Transaction ID: 12119826
City State Zip Code Butler NJ 07405	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer Caremark	Occupation Account Executive	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 85 / 131
	<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)
Steven Schaper

Mailing Address 8 White Birch Terrace

City State Zip Code
Butler NJ 07405

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

Name of Employer Caremark Occupation Account Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120040

Amount of Each Receipt this Period
20.00

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12119827

Amount of Each Receipt this Period
50.00

Receipt

C. 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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120041

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 131
	<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. Ramona Seabaugh		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 2211 Sanders Road 4th Floor		Transaction ID: 12119828
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation Manager	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ramona Seabaugh		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 2211 Sanders Road 4th Floor		Transaction ID: 12120042
City Northbrook State IL Zip Code 60062-6150	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation Manager	Aggregate Year-to-Date ▼ 320.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Wendy See		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 17 Honey Bear Court		Transaction ID: 12119829
City Little Rock State AR Zip Code 72223	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Caremark Occupation DIR ACCOUNT MANAGEMENT	Aggregate Year-to-Date ▼ 800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 131
	<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)
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 DIR ACCOUNT MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2006

Transaction ID: 12120043

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 AVP ACCOUNT MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2006

Transaction ID: 12120167

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 AVP ACCOUNT MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1326.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2006

Transaction ID: 12120243

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: PAGE 88 / 131
(check only one)
 11a 11b 11c 12
 13 14 15 16 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 15800 SW 25th St

City State Zip Code
Hollywood FL 33027-4222

FEC ID number of contributing federal political committee. C

Name of Employer Caremark Occupation VP GENERAL MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 12119831

Amount of Each Receipt this Period
50.00

Receipt

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

Mailing Address 15800 SW 25th St

City State Zip Code
Hollywood FL 33027-4222

FEC ID number of contributing federal political committee. C

Name of Employer Caremark Occupation VP GENERAL MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 850.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120045

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Brian Shields

Mailing Address 604 Silverspring Drive

City State Zip Code
Richmond VA 23229

FEC ID number of contributing federal political committee. C

Name of Employer Caremark Occupation Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 12120168

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional) 120.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 131
	<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)
Brian Shields

Mailing Address 604 Silverspring Drive

City Richmond State VA Zip Code 23229

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2006

Transaction ID: 12120244

Amount of Each Receipt this Period
 20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jerry Shipkin

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2006

Transaction ID: 12119833

Amount of Each Receipt this Period
 40.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jerry Shipkin

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2006

Transaction ID: 12120047

Amount of Each Receipt this Period
 40.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 100.00

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 90 / 131
	<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)
Carolyn Simas

Mailing Address 6708 Ranchwood Avenue

City State Zip Code
Chino Hills CA 91709

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

Name of Employer Caremark Occupation Supervisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119834

Amount of Each Receipt this Period
15.00

Receipt

B. Full Name (Last, First, Middle Initial)
Carolyn Simas

Mailing Address 6708 Ranchwood Avenue

City State Zip Code
Chino Hills CA 91709

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

Name of Employer Caremark Occupation Supervisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2006

Transaction ID: 12120048

Amount of Each Receipt this Period
15.00

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 Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2006

Transaction ID: 12120169

Amount of Each Receipt this Period
35.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	65.00
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 91 / 131
	<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. Gerald Simpson		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 2211 Sanders Road		Transaction ID: 12120245	
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 Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00		

Full Name (Last, First, Middle Initial) B. Christopher Sims		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 12120170	
City State Zip Code Irving TX 75039	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
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 ▼ 1232.00		

Full Name (Last, First, Middle Initial) C. Christopher Sims		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 12120246	
City State Zip Code Irving TX 75039	Amount of Each Receipt this Period 77.00		
FEC ID number of contributing federal political committee. C		Receipt	
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 ▼ 1309.00		

SUBTOTAL of Receipts This Page (optional) ▶	189.00
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 92 / 131
	<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)
Gary Slagle

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 SR VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12120184

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gary Slagle

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 SR VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120248

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 11311 McCormick Road
Building 75, Suite 230

City Hunt Valley State MD Zip Code 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 ▼ 1200.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12119839

Amount of Each Receipt this Period
75.00

Receipt

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 93 / 131
<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. Alice Sloan		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 11311 McCormick Road Building 75, Suite 230		Transaction ID: 12120053
City Hunt Valley	State MD	Zip Code 21031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Caremark	Occupation VP ACCOUNT MANAGEMENT	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1275.00	

Full Name (Last, First, Middle Initial) B. Laura Smith		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address 6471 Twin Lakes		Transaction ID: 12120172
City Mason	State OH	Zip Code 45040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Caremark	Occupation Account Executive	Receipt
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. Laura Smith		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 6471 Twin Lakes		Transaction ID: 12120249
City Mason	State OH	Zip Code 45040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Caremark	Occupation Account Executive	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

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:	PAGE 94 / 131
	(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)
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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12119841

Amount of Each Receipt this Period
77.00

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120055

Amount of Each Receipt this Period
77.00

Receipt

C. 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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3015.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12119842

Amount of Each Receipt this Period
192.00

Receipt

SUBTOTAL of Receipts This Page (optional)	346.00
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 95 / 131
	<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

Full Name (Last, First, Middle Initial) A. William Spalding		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 211 Commerce Street		Transaction ID: 12120056	
City State Zip Code Nashville TN 37201-1806	Amount of Each Receipt this Period 192.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation EVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3207.00		

Full Name (Last, First, Middle Initial) B. David Specht		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119843	
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 SERVICE OPERATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00		

Full Name (Last, First, Middle Initial) C. David Specht		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12120057	
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 SERVICE OPERATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00		

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 96 / 131
	<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. William Spehr		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 11311 McCormick Road Building 75, Suite 230		Transaction ID: 12119844
City State Zip Code Hunt Valley MD 21031	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation SVP ACCOUNT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) B. William Spehr		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 11311 McCormick Road Building 75, Suite 230		Transaction ID: 12120058
City State Zip Code Hunt Valley MD 21031	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Caremark	Occupation SVP ACCOUNT SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) C. Carolyn Stang		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 2211 Sanders Road		Transaction ID: 12120185
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	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1232.00	

SUBTOTAL of Receipts This Page (optional) ▶	177.00
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 97 / 131		
	<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. Carolyn Stang		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 2211 Sanders Road		Transaction ID: 12120251	
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		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1309.00		

Full Name (Last, First, Middle Initial) B. Paul Stivender		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 300 Overbrook Road		Transaction ID: 12119848	
City State Zip Code Birmingham AL 35213	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) C. Paul Stivender		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 300 Overbrook Road		Transaction ID: 12120062	
City State Zip Code Birmingham AL 35213	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation SR VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00		

SUBTOTAL of Receipts This Page (optional) ▶	177.00
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 98 / 131
	<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)
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 ▼ 1600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 12119849

Amount of Each Receipt this Period
100.00

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 ▼ 1700.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 6

Transaction ID: 12120063

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Joellen Sullivan

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 SR VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 2 / 2 0 0 6

Transaction ID: 60913.C20265

Amount of Each Receipt this Period
1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1700.00
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 99 / 131
	<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)
Marian Swanson

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120174

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
Marian Swanson

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120252

Amount of Each Receipt this Period
40.00

Receipt

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

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 TRADE RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12119851

Amount of Each Receipt this Period
35.00

Receipt

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 100 / 131
	<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. Albert Thigpen		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 2211 Sanders Road		Transaction ID: 12120065
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 VP TRADE RELATIONS	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 595.00		

Full Name (Last, First, Middle Initial) B. Karen Thompson		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address 1057 SW Depot Court		Transaction ID: 12120175
City Port Orchard State WA Zip Code 98367	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer Caremark Occupation Account Executive	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) C. Karen Thompson		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 1057 SW Depot Court		Transaction ID: 12120253
City Port Orchard State WA Zip Code 98367	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer Caremark Occupation Account Executive	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt
Aggregate Year-to-Date ▼ 340.00		

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 / 131
	<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)
Janet Toth

Mailing Address 112 Lancaster Avenue

City Pittsburgh State PA Zip Code 15228

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2006

Transaction ID: 12120176

Amount of Each Receipt this Period
 20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Janet Toth

Mailing Address 112 Lancaster Avenue

City Pittsburgh State PA Zip Code 15228

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

Name of Employer Caremark Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2006

Transaction ID: 12120254

Amount of Each Receipt this Period
 20.00

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2006

Transaction ID: 12119855

Amount of Each Receipt this Period
 77.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	117.00
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 102 / 131
	<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)
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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120069

Amount of Each Receipt this Period
77.00

Receipt

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

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 Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12119857

Amount of Each Receipt this Period
35.00

Receipt

C. Full Name (Last, First, Middle Initial)
Leslie Wachsmann

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 Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120071

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 103 / 131
	<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)
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 Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12120178

Amount of Each Receipt this Period
35.00

Receipt

B. 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 Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120256

Amount of Each Receipt this Period
35.00

Receipt

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

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 MGR TRADE PLANNING & ANALYSIS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12120177

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 / 131
	<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. Mark Walker		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12120255	
City State Zip Code Scottsdale AZ 85260		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation MGR TRADE PLANNING & ANALYSIS		Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) B. Sandra Wallace		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 2211 Sanders Road 5th Floor		Transaction ID: 12120179	
City State Zip Code Northbrook IL 60062-6150		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation Manager		Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Sandra Wallace		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 2211 Sanders Road 5th Floor		Transaction ID: 12120257	
City State Zip Code Northbrook IL 60062-6150		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark Occupation Manager		Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	60.00

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 105 / 131
	<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. Lee Warshawsky		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12119861	
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 VP MAIL SVC BUSINESS OPERATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) B. Lee Warshawsky		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address 9501 East Shea Blvd		Transaction ID: 12120075	
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 VP MAIL SVC BUSINESS OPERATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00		

Full Name (Last, First, Middle Initial) C. Walter Washburn		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 12119862	
City State Zip Code Irving TX 75039	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation DIR IT PROJECTS		
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) ▶	115.00
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 106 / 131						
	(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. Walter Washburn		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 750 W. John Carpenter Fwy Suite 1200		Transaction ID: 12120076
City Irving	State TX	Zip Code 75039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Caremark	Occupation DIR IT PROJECTS	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) B. Mark Weeks		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 12119864
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 SR VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	

Full Name (Last, First, Middle Initial) C. Mark Weeks		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address 211 Commerce Street Suite 800		Transaction ID: 12120078
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 SR VP	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	

SUBTOTAL of Receipts This Page (optional)	▶	215.00
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 107 / 131
	<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)
John Wengler

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 Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12119865

Amount of Each Receipt this Period
20.00

Receipt

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

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 Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120079

Amount of Each Receipt this Period
20.00

Receipt

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

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 MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1280.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12119866

Amount of Each Receipt this Period
80.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 / 131
	<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)
Scott Wertz

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 MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1360.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120080

Amount of Each Receipt this Period
80.00

Receipt

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

Mailing Address 4411 Tweedsmuir Court

City State Zip Code
Moseley VA 23120

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12120186

Amount of Each Receipt this Period
35.00

Receipt

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

Mailing Address 4411 Tweedsmuir Court

City State Zip Code
Moseley VA 23120

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120259

Amount of Each Receipt this Period
35.00

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: (check only one)	PAGE 109 / 131
	<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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12120181

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
08 / 25 / 2006

Transaction ID: 12120260

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 Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
08 / 11 / 2006

Transaction ID: 12119869

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 110 / 131
	<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 State Zip Code
San Antonio TX 78238-4509

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

Name of Employer Caremark Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120083

Amount of Each Receipt this Period
40.00

Receipt

B. Full Name (Last, First, Middle Initial)
Thomas Wood

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 Account Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2006

Transaction ID: 12120182

Amount of Each Receipt this Period
20.00

Receipt

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

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 Account Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2006

Transaction ID: 12120261

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	80.00
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 111 / 131
	<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)
Kristin Wood-Hales

Mailing Address 4041 Newport Lane

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Caremark Occupation Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2006

Transaction ID: 12119872

Amount of Each Receipt this Period
20.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kristin Wood-Hales

Mailing Address 4041 Newport Lane

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Caremark Occupation Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2006

Transaction ID: 12120086

Amount of Each Receipt this Period
20.00

Receipt

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

Mailing Address 4250 St. Claire Drive

City State Zip Code
Columbia SC 29206

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

Name of Employer Caremark Occupation CLINICAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2006

Transaction ID: 12120183

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 112 / 131
	<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. William Yates		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 4250 St. Claire Drive		Transaction ID: 12120262	
City State Zip Code Columbia SC 29206	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation CLINICAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) B. Eric Yonkus		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address 5235 Ravenswood #10		Transaction ID: 12119874	
City State Zip Code Chicago IL 60640	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00		

Full Name (Last, First, Middle Initial) C. Eric Yonkus		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address 5235 Ravenswood #10		Transaction ID: 12120088	
City State Zip Code Chicago IL 60640	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Caremark	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00		

SUBTOTAL of Receipts This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	17784.00

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 113 / 131

<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. Texas Freedom Fund		Transaction ID: 242602 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 2000.00
City Alexandria State VA Zip Code 22301-1015	Category/ Type PAC TO PAC	
Purpose of Disbursement PAC TO PAC		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Other 2006		

Full Name (Last, First, Middle Initial) B. Becerra for Congress		Transaction ID: 242613 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 116		Amount of Each Disbursement this Period 1000.00
City Hyattsville State MD Zip Code 20781-0116	Category/ Type CA-31 US HOUSE G06	
Purpose of Disbursement CA-31 US HOUSE G06		
Candidate Name XAVIER BECERRA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 31		

Full Name (Last, First, Middle Initial) C. Friends of Roy Blunt		Transaction ID: 242609 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003-	Category/ Type MO-07 US HOUSE G06	
Purpose of Disbursement MO-07 US HOUSE G06		
Candidate Name ROY BLUNT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 07		

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

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)

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<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. Friends of Hillary (D-NY)		Transaction ID: 242600 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 1717 K Street NW, Suite 309-A		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20036-5346	Category/ Type NY-US SENATE P06	
Purpose of Disbursement NY-US SENATE P06		
Candidate Name HILLARY RODHAM CLINTON		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Hillary (D-NY)		Transaction ID: 242601 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 1717 K Street NW, Suite 309-A		Amount of Each Disbursement this Period -1000.00
City Washington State DC Zip Code 20036-5346	Category/ Type CHECK VOIDED NEVER RECEIVED	
Purpose of Disbursement CHECK VOIDED NEVER RECEIVED		
Candidate Name HILLARY RODHAM CLINTON		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ensign for Senate		Transaction ID: 242611 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address P.O. Box 26568		Amount of Each Disbursement this Period 2000.00
City Las Vegas State NV Zip Code 89126-0568	Category/ Type NV-US SENATE G06	
Purpose of Disbursement NV-US SENATE G06		
Candidate Name JOHN ERIC ENSIGN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" 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) ▶	

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

A. Full Name (Last, First, Middle Initial) Bart Gordon Committee (D-TN)		Transaction ID: 242614 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 2008		Amount of Each Disbursement this Period 2000.00
City Murfreesboro State TN Zip Code 37133-2008	Category/ Type	
Purpose of Disbursement TN-06 US HOUSE G06		TN-06 US HOUSE G06
Candidate Name BARTON JENNINGS GORDON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 06		
B. Full Name (Last, First, Middle Initial) Lindsey Graham for Senate		Transaction ID: 242599 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 211 N Union St Ste 200		Amount of Each Disbursement this Period 2000.00
City Alexandria State VA Zip Code 22314-2643	Category/ Type	
Purpose of Disbursement SC/US SENATE P06		SC/US SENATE P06
Candidate Name LINDSEY OLIN GRAHAM		
Office Sought: <input type="checkbox"/> House <input checked="" 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: SC District: 00		
C. Full Name (Last, First, Middle Initial) People with Hart		Transaction ID: 242605 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 501 L Street NW, #1		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20001-3670	Category/ Type	
Purpose of Disbursement PA-04 US HOUSE G06		PA-04 US HOUSE G06
Candidate Name MELISSA A. HART		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 04		

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

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. Friends of Bobby Jindal Inc. (R-LA)		Transaction ID: 242612 Date of Disbursement 08 / 03 / 2006
Mailing Address P. O. Box 8628		Amount of Each Disbursement this Period 1000.00
City Metairie State LA Zip Code 70011-	Category/ Type	
Purpose of Disbursement LA-01 US HOUSE G06		
Candidate Name BOBBY JINDAL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	LA-01 US HOUSE G06
Full Name (Last, First, Middle Initial) B. Johnson for Congress Committee		Transaction ID: 242657 Date of Disbursement 08 / 03 / 2006
Mailing Address 2875 Towerview Rd Suite 1000		Amount of Each Disbursement this Period 3000.00
City Herndon State VA Zip Code 20171-	Category/ Type	
Purpose of Disbursement CT US HOUSE G06		
Candidate Name NANCY L. JOHNSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CT US HOUSE G06
Full Name (Last, First, Middle Initial) C. Ron Lewis for Congress		Transaction ID: 242603 Date of Disbursement 08 / 03 / 2006
Mailing Address PO Box 307		Amount of Each Disbursement this Period 2000.00
City Elizabethtown State KY Zip Code 42702-0307	Category/ Type	
Purpose of Disbursement KY-02 US HOUSE G06		
Candidate Name RON LEWIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	KY-02 US HOUSE G06

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

**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)

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<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. Friends of Blanche Lincoln (D-AR)		Transaction ID: 242608 Date of Disbursement
Mailing Address 301 E 4th St Fl 2		<input type="text" value="08"/> / <input type="text" value="03"/> / <input type="text" value="2006"/>
City Little Rock	State AR	Zip Code 72202-2403
Purpose of Disbursement AR-US Senate P2	<input type="text" value="010"/>	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name BLANCHE LAMBERT LINCOLN	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AR-US SENATE P2
State: AR	District: 00	

Full Name (Last, First, Middle Initial) B. New Democrat Coalition PAC		Transaction ID: 242606 Date of Disbursement
Mailing Address 607 14th St NW Ste 800		<input type="text" value="08"/> / <input type="text" value="03"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20005-2005
Purpose of Disbursement PAC TO PAC	<input type="text" value=""/>	Amount of Each Disbursement this Period <input type="text" value="5000.00"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	PAC TO PAC
State:	District:	Other 2006

SUBTOTAL of Disbursements This Page (optional) ►

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Joe Armstrong Campaign Committee		Transaction ID: 242643 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 4708 Hilldale Dr		Amount of Each Disbursement this Period 300.00
City Knoxville State TN Zip Code 37914-5069	Purpose of Disbursement TN STATE HOUSE G06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Stratton Bone		Transaction ID: 242625 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 2455 Carthage Hwy		Amount of Each Disbursement this Period 200.00
City Lebanon State TN Zip Code 37087-9581	Purpose of Disbursement TN STATE HOUSE G06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Rob Briley Campaign Committee		Transaction ID: 242652 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 511 Union St Ste 1610		Amount of Each Disbursement this Period 300.00
City Nashville State TN Zip Code 37219-1733	Purpose of Disbursement TN STATE HOUSE G06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	_____

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Harry Brooks for State House Committee		Transaction ID: 242641 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 6600 Washington Pike		Amount of Each Disbursement this Period 200.00
City Knoxville State TN Zip Code 37918-7107		
Purpose of Disbursement TN STATE HOUSE G06	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Tim Burchett		Transaction ID: 242627 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 8220 Bennington Dr		Amount of Each Disbursement this Period 300.00
City Knoxville State TN Zip Code 37909-2303		
Purpose of Disbursement TN STATE SENATE G06	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Charlotte Burks		Transaction ID: 242630 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 18131 Crossville Hwy		Amount of Each Disbursement this Period 400.00
City Monterey State TN Zip Code 38574-3744		
Purpose of Disbursement TN STATE SENATE G06	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	_____

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Kent Coleman Campaign Committee		Transaction ID: 242645 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 14 N Public Sq		Amount of Each Disbursement this Period 300.00
City Murfreesboro	State TN Zip Code 37130-3633	
Purpose of Disbursement TN STATE HOUSE G06		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Charles Curtiss Campaign Committee		Transaction ID: 242617 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 120 General Jones Rd		Amount of Each Disbursement this Period 500.00
City Sparta	State TN Zip Code 38583-7131	
Purpose of Disbursement TN STATE HOUSE G06		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. John DeBerry Campaign Committee		Transaction ID: 242644 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 1207 Sledge Ave		Amount of Each Disbursement this Period 300.00
City Memphis	State TN Zip Code 38104-4659	
Purpose of Disbursement TN STATE HOUSE G06		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Committee to Re-Elect Lois DeBerry		Transaction ID: 242624 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 2429 Verdun St		Amount of Each Disbursement this Period 500.00
City Memphis State TN Zip Code 38114-5847	Category/ Type	
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Bill Dunn		Transaction ID: 242623 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 1201 W 4th Ave		Amount of Each Disbursement this Period 400.00
City Knoxville State TN Zip Code 37921-3514	Category/ Type	
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dennis Ferguson Campaign Committee		Transaction ID: 242634 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 2851 Roane State Hwy		Amount of Each Disbursement this Period 300.00
City Harriman State TN Zip Code 37748-7779	Category/ Type	
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Committee to Re-Elect Craig Fitzhugh		Transaction ID: 242628 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 135 S Alpine St		Amount of Each Disbursement this Period 500.00
City Ashland State MS Zip Code 38603-	Purpose of Disbursement TN STATE HOUSE G06 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Bill Harmon Campaign Committee		Transaction ID: 242615 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 107 Harmon Dr N		Amount of Each Disbursement this Period 300.00
City Dunlap State TN Zip Code 37327-4500	Purpose of Disbursement TN STATE HOUSE G06 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Friends of Senator Thelma Harper		Transaction ID: 242639 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 2722 Scovel St		Amount of Each Disbursement this Period 400.00
City Nashville State TN Zip Code 37208-2847	Purpose of Disbursement TN STATE SENATE G06 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Mike Harrison Campaign Committee		Transaction ID: 242647 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 850		Amount of Each Disbursement this Period 300.00
City Rogersville	State TN	
Zip Code 37857-0850		
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Douglas Henry		Transaction ID: 242626 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 408 Wilsonia Ave		Amount of Each Disbursement this Period 500.00
City Nashville	State TN	
Zip Code 37205-1328		
Purpose of Disbursement TN STATE SENATE G06		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Roy Herron Campaign Committee		Transaction ID: 242653 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 5		Amount of Each Disbursement this Period 300.00
City Dresden	State TN	
Zip Code 38225-0005		
Purpose of Disbursement TN STATE SENATE G06		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Doug Jackson Campaign Committee		Transaction ID: 242636 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 119 Tanglewood Dr		Amount of Each Disbursement this Period 300.00
City Dickson	State TN	
Zip Code 37055-3343		Category/ Type
Purpose of Disbursement TN STATE SENATE G06		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Ulysses Jones Campaign Committee		Transaction ID: 242654 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 2158 Piedmont Ave		Amount of Each Disbursement this Period 300.00
City Memphis	State TN	
Zip Code 38108-3024		Category/ Type
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Committee to Re-Elect Mark Maddox		Transaction ID: 242620 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 245 Legens St		Amount of Each Disbursement this Period 300.00
City Dresden	State TN	
Zip Code 38225-4107		Category/ Type
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Don McCleary Campaign Committee		Transaction ID: 242635 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 125 Ed Smith Rd		Amount of Each Disbursement this Period 400.00
City Humboldt State TN Zip Code 38343-8127	Category/ Type	
Purpose of Disbursement TN STATE SENATE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Joe McCord		Transaction ID: 242622 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 4504 Montvale Rd		Amount of Each Disbursement this Period 300.00
City Maryville State TN Zip Code 37803-2761	Category/ Type	
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Committee to Re-Elect Bob McKee		Transaction ID: 242619 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 120 Country Club Lane		Amount of Each Disbursement this Period 500.00
City Knoxville State TN Zip Code 37901-	Category/ Type	
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Committee to Re-Elect Randy McNally		Transaction ID: 242621 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 94 Royal Troon		Amount of Each Disbursement this Period 500.00
City Maryville State TN Zip Code 37803-	Category/ Type	
Purpose of Disbursement TN STATE SENATE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Larry Miller Campaign Committee		Transaction ID: 242646 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 1673		Amount of Each Disbursement this Period 300.00
City Memphis State TN Zip Code 38101-1673	Category/ Type	
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Richard Montgomery Campaign		Transaction ID: 242651 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 1482 Broad River Ln		Amount of Each Disbursement this Period 300.00
City Sevierville State TN Zip Code 37876-0194	Category/ Type	
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	_____

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Doug Overbey Campaign Committee		Transaction ID: 242637 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 1105 N Heritage Dr		Amount of Each Disbursement this Period 300.00
City Maryville State TN Zip Code 37803-6411	Purpose of Disbursement TN STATE HOUSE G06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. RAAMPAC		Transaction ID: 242649 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 158213		Amount of Each Disbursement this Period 1000.00
City Nashville State TN Zip Code 37215-8213	Purpose of Disbursement	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Randy Rinks Campaign Committee		Transaction ID: 242650 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 58		Amount of Each Disbursement this Period 500.00
City Pickwick Dam State TN Zip Code 38365-0058	Purpose of Disbursement TN STATE HOUSE G06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1800.00
TOTAL This Period (last page this line number only) ▶	_____

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Dennis Roach Campaign Committee		Transaction ID: 242633 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 4519 Highway 92		Amount of Each Disbursement this Period 300.00
City Rutledge State TN Zip Code 37861-4665	Category/ Type	
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Bob Rochelle for Senate		Transaction ID: 242616 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 109 Castle Heights Ave		Amount of Each Disbursement this Period 500.00
City Lebanon State TN Zip Code 37087-3416	Category/ Type	
Purpose of Disbursement TN STATE SENATE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Committee to Re-Elect Charles Sargent		Transaction ID: 242618 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 1515		Amount of Each Disbursement this Period 500.00
City Franklin State TN Zip Code 37065-1515	Category/ Type	
Purpose of Disbursement TN STATE HOUSE G06		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1300.00
TOTAL This Period (last page this line number only) ▶

**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 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 checked="" 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. David Shepard Campaign Committee		Transaction ID: 242632 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 204 McCreary Heights		Amount of Each Disbursement this Period 300.00
City State Zip Code Dickson TN 37055-	Purpose of Disbursement TN STATE HOUSE G06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Janis Sontany Campaign Committee		Transaction ID: 242642 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 188 Chilton St		Amount of Each Disbursement this Period 300.00
City State Zip Code Nashville TN 37211-2927	Purpose of Disbursement TN STATE HOUSE G06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Committee to Re-Elect Steve Southerland		Transaction ID: 242629 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 4648 Harbor Dr		Amount of Each Disbursement this Period 500.00
City State Zip Code Morristown TN 37814-7713	Purpose of Disbursement TN STATE SENATE G06	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
TOTAL This Period (last page this line number only) ▶

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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. Speakers Fund		Transaction ID: 242656 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 190495		Amount of Each Disbursement this Period 1000.00
City Nashville	State TN	
Zip Code 37219-0495		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Other 2006	

Full Name (Last, First, Middle Initial) B. Paul Stanley for Senate		Transaction ID: 242648 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 7511 Neshoba Rd		Amount of Each Disbursement this Period 300.00
City Germantown	State TN	
Zip Code 38138-2144		
Purpose of Disbursement TN STATE SENATE G06		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Other 2006	

Full Name (Last, First, Middle Initial) C. Senate Democratic Caucus/TN State Sen		Transaction ID: 242655 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 5 LEGISLATIVE PLAZA		Amount of Each Disbursement this Period 1000.00
City Nashville	State TN	
Zip Code 37243-0001		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Other 2006	

SUBTOTAL of Disbursements This Page (optional) ▶	2300.00
TOTAL This Period (last page this line number only) ▶

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 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 checked="" 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. Harry Tindell for State House Committee		Transaction ID: 242640 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address PO Box 27325		Amount of Each Disbursement this Period 300.00
City Knoxville State TN Zip Code 37927-	Purpose of Disbursement TN STATE HOUSE G06 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Curry Todd Campaign Committee		Transaction ID: 242631 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 891 Lancelot Cir Ste 200		Amount of Each Disbursement this Period 300.00
City Collierville State TN Zip Code 38017-6118	Purpose of Disbursement TN STATE HOUSE G06 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Eddie Yokley Campaign Committee		Transaction ID: 242638 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 1046 Old Kentucky Rd S		Amount of Each Disbursement this Period 200.00
City Greeneville State TN Zip Code 37743-7140	Purpose of Disbursement TN STATE HOUSE G06 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
TOTAL This Period (last page this line number only) ▶	16800.00