Image#	119319	949530
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FEC FORM 3X	AND	PORT OF RE D DISBURSE ther Than An Author	MENTS	ee	Office Use Only	
1. NAME OF COMMITTEE (in fi		EC MAILING LABEL PE OR PRINT 🕎	Example:If typing over the lines	, type		
MEDCO HEALTH	street)			Medco Health PAC)		
than previous reported. (AC		I RAFAEL │			94901	
2. FEC IDENTIFICAT	ION NUMBER	CITY	<b>k</b>	STATE		DDE 🔺
C00384362		3. IS TH REP		NEW N) <b>OR</b>	AMENDED (A)	
July 15 Quarterly October Quarterly January 3 Quarterly July 31 M Report(N Year Onl	orts: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) fid-Year on-election	Monthly Report Feb 20 Due On: Mar 20 Apr 20 (c) 12-Day PRE-Election Report for the: (d) 30-Day Post -Election Report for the: Election o	(M3) X (M4) X Primary (12P Convention ( n General (30G	, s	Aug 20 (M8)         Sep 20 (M9)         Oct 20 (M10)         General (12G)         Special (12G)         in the State         Runoff (30R)         in the State	of Special (30S)
Type or Print Name of T Signature of Treasurer	reasurer Jas	0 1 2 0 1 1 nd to the best of my knowle son D. Kaune iled by Jason D. Kaune r incomplete information m		true, correct and cc	07 18	2 0 1 1
Office Use Only					FEC FOI (Rev. 12/2	RM 3X

FEC Form 3X (Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

\	Write or Type Committee Name MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)								
F	Report Covering the Period: From: $06$		To: 0 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						
		COLUMN A This Period	COLUMN B Calendar Year-to-Date						
6.	(a) Cash on Hand January 1 2011 <sup>Y Y Y</sup>		612789.94						
	(b) Cash on Hand at Begining of Reporting Period	666166.95							
	(c) Total Receipts (from Line 19)	58723.15	371758.21						
	(d) Subtotal (add lines 6(b) and								
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	724890.10	984548.15						
7.	Total Disbursements (from Line 31)	92101.50	351759.55						
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	632788.60	632788.60						
9.	Debts and Obligations owed <b>TO</b> the committee (Itemize all on								
	Schedule C and/or Schedule D)	0.00							
10.	. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D)	1300.25							

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

# For further information contact:

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

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

FE6AN026

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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

F	Report Covering the Period: From:		To:
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	55393.16	273909.13
	(ii) Unitemized	1304.64	95704.57
	(iii) TOTAL (add Lines 11(a)(i) and (ii) 🕨	56697.80	369613.70
	(b) Political Party Committees	0.00	0.00
	<ul> <li>(c) Other Political Committees (such as PACs)</li> <li>(d) Total Contributions (add Lines</li> </ul>	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ►	56697.80	369613.70
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	2000.00	2000.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	25.35	144.51
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))	58723.15	371758.21
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	58723.15	371758.21

FE6AN026

#### DETAILED OLIMITADY DAGE

DETAILED SUMMARY PAGE of Disbursements

**COLUMN A** 

**Total This Period** 

0.00

0.00

351.50

351.50

48500.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

43250.00

FEC Form 3X (Rev. 02/2003)

# 

<ol> <li>21. Operating Expenditures:         <ul> <li>(a) Shared Federal/Non-Federal Activity (from Schedule H4)</li> <li>(i) Federal Share</li></ul></li></ol>		II. DISBURSEMENTS					
<ul> <li>(b) Other Federal Operating Expenditures</li></ul>	21.	(a) Shared Federal/Non-Federal Activity (from Schedule H4)					
<ul> <li>Expenditures</li></ul>							
<ul> <li>(add 21(a)(i), (a)(ii) and (b))</li></ul>		()					
<ol> <li>Transfers to Affiliated/Other Party Committees</li></ol>		-					
<ul> <li>Committees</li></ul>							
<ol> <li>Contributions to Federal Candidates/Committees</li></ol>	22.	Transfers to Affiliated/Other Party					
<ul> <li>(use Schedule E)</li> <li>25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)</li> <li>26. Loan Repayments Made</li> <li>27. Loans Made</li> <li>28. Refunds of Contributions To: (a) Individuals/Persons Other</li> </ul>	23.	Contributions to					
<ol> <li>25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)</li> <li>26. Loan Repayments Made</li> <li>27. Loans Made</li> <li>28. Refunds of Contributions To: (a) Individuals/Persons Other</li> </ol>	24.	Independent Expenditure					
<ol> <li>Loans Made</li> <li>Refunds of Contributions To:         <ul> <li>(a) Individuals/Persons Other</li> </ul> </li> </ol>	25.	Coordinated Expenditures Made by Party					
<ul><li>28. Refunds of Contributions To:</li><li>(a) Individuals/Persons Other</li></ul>	26.	Loan Repayments Made					
		Refunds of Contributions To: (a) Individuals/Persons Other					

(b) Political Party Committees (c) Other Political Committees

(d) Total Contribution Refunds

29. Other Disbursements.....

30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6)

(i) Federal Share .....

(ii) "Levin" Share ..... (b) Federal Election Activity Paid Entirely With Federal Funds ..... (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....

31. Total Disbursements (add Lines 21(c), 22,

32. Total Federal Disbursements

from Line 31).....

23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

(such as PACs) .....

	0.00
	0.00
	0.00
	4259.55
	4259.55
	0.00
	0.00
	294500.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
L	0.00
	0.00
	53000.00

			0.00
			0.00
			0.00
			0.00

92101.50

92101.50

_	 _	_	_	0.00
				0.00
				0.00
				0.00

351759.55

(subtract Line 21(a)(ii) and Line 30(a)(ii)

351759.55

FE6AN026

Page 4

**COLUMN B** 

Calendar Year-to-Date

# 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)	56697.80	369613.70
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	56697.80	369613.70
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	351.50	4259.55
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88.	Net Operating Expenditures (subtract Line 37 from Line 36)	351.50	4259.55

FE6AN026

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 6 / 434 (check only one)					
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
	MEDCO HEALTH SOLUTIONS INC. F	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M							
Α.	Full Name (Last, First, Middle Initial) MR THOMAS ABSON	Date of Receipt							
	Mailing Address 57 SYCAMORE DRIV	E		M M         /         D D         /         Y					
	City	State	Zip Code	Transaction ID: INCA100201					
	WALDWICK	NJ	07463	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FOF	n RMULARY & COVERAGE M	GMT					
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary     General       Other (specify) ▼		325.00	]					
В.	Full Name (Last, First, Middle Initial) MS LUCILLE ACCETTA			Date of Receipt					
	Mailing Address 11 ANDOVER CT			0 6 0 4 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA100213					
	CORTLANDT MANOR	NY	10567	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS						
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary     General       Other (specify) ▼	0 0	325.00	]					
С.	Full Name (Last, First, Middle Initial) MS LESLIE ACHTER	I		Date of Receipt					
	Mailing Address 821 ALBEMARLE STF	REET		M M / D D / Y Y Y Y 06 04 2011					
	City	State	Zip Code	Transaction ID: INCA100188					
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		50.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ANA	n LYTICAL SVCS						
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary     General       Other (specify) ▼	0 0	650.00						
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 7 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17				
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I							
A.	Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK			Date of Receipt				
	Mailing Address 1021 SUNSET RIDGE			0 6 0 4 Y Y Y Y 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100094				
	BRIDGEWATER	NJ	08807	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n RM CONTRACT & CONSUL	TING				
	Receipt For:	1 · · · · · · · · · · · · · · · · · · ·	e Year-to-Date V					
	Primary     General       Other (specify) ▼	0 0	650.00	]				
B.	Full Name (Last, First, Middle Initial) DIANE ADAMS			Date of Receipt				
	Mailing Address 34 THOMAS ST.			0 6 0 4 Y Y Y Y Y 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100569				
	CALDWELL	NJ	07006	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	on BUSINESS REQUIREMENT	s				
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼		325.00					
с.	Full Name (Last, First, Middle Initial) MR STEPHEN ADLER			Date of Receipt				
	Mailing Address 139 BELLVALE LAKE	S RD		M M / D D / Y Y Y Y 06 04 2011				
	City	State	Zip Code	Transaction ID: INCA100186				
	WARWICK	NY	10990	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS		) TECHNOLOGY					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼		650.00	]				
	SUBTOTAL of Receipts This Page (optional)		••••••	125.00				
	TOTAL This Period (last page this line number	only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 8 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17					
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N							
<b>A</b> .	Full Name (Last, First, Middle Initial) MS KELLY AGNEW	Date of Receipt							
	Mailing Address 77 W. HURON STREE #2209	Т		M         M         /         D         D         /         Y					
	City CHICAGO	State IL	Zip Code	Transaction ID: INCA100108					
	FEC ID number of contributing federal political committee.	C	60654	Amount of Each Receipt this Period					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio NATL AC	n CCT EXEC	-					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]					
в.	Full Name (Last, First, Middle Initial) MS MICHELE AGNEW Mailing Address 2433 ANDERSON PAF	RK DRIVE		Date of Receipt					
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100083					
	HENDERSON	NV	89044	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		12.50					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR HR	n						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]					
с.	Full Name (Last, First, Middle Initial) MR JOHN AHLER			Date of Receipt					
	Mailing Address 2677 SKELTON LANE			M M / D D / Y Y Y Y 06 04 2011					
	City	State	Zip Code	Transaction ID: INCA100551					
	BLACKLICK, FEC ID number of contributing federal political committee.	OH C	43004	Amount of Each Receipt this Period 12.50					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n NRM PRACTICE	_					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]					
	SUBTOTAL of Receipts This Page (optional)			50.00					
	TOTAL This Period (last page this line number of	only)							

				FOR LINE NUMBER: PAGE 9 / 434
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
	Г			13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	n for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) JANET ALEXANDER	Date of Receipt		
	Mailing Address 32 WEST 83RD STREE	ΞT		
	APT #2	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100624
	NEW YORK	NY	10024	Amount of Each Receipt this Period
	FEC ID number of contributing	0 0 0 0 0 0		
	federal political committee.	C		25.00
	Name of Employer	Occupatio	n	-
	Name of Employer MEDCO HEALTH SOLUTIONS			
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		325.00	
	Other (specify)	0 0		
	Full Name (Last, First, Middle Initial)			
В.	DR JODY ALLEN			Date of Receipt
	Mailing Address 3031 MOUNT HILL DR			0 6 0 4 Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100185
	MIDLOTHIAN	VA	23113	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		
				_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		650.00	
				·
C.	Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO			Date of Receipt
0.	Mailing Address 19 ROSS ROAD			M M / D D / Y Y Y Y
				06 04 2011
	City <u>SCARSDALE</u>	State NY	Zip Code	Transaction ID: INCA100270
			10583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer	Occupatio	n	-
	Name of Employer MEDCO HEALTH SOLUTIONS		) TECHNOLOGY	
	Receipt For:	1	e Year-to-Date 🔻	
	Primary General		650.00	
	Other (specify)	0 0		1
	SUBTOTAL of Receipts This Page (optional)		•••••••••••••••••••••••••••••••••••••••	125.00
	TOTAL This Period (last page this line number o	nlv)		
		"", <b>y</b> )		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 10 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) TEJWANSH ANAND	Date of Receipt		
	Mailing Address 10 WHIPPOORWILL	0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100526
	CHAPPAQUA	NY	10514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INFO	n • TECHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)	0 0	650.00	
	Full Name (Last, First, Middle Initial) MR EVAN ANDRICOPOULOS			Date of Receipt
	Mailing Address 216 ARROWOOD WA	M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: INCA100339
	BASKING RIDGE	NJ	07920	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	<sup>n</sup> BUSINESS REQUIREMENT	S
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	Full Name (Last, First, Middle Initial) MRS LAUREN ANTONELLI			Date of Receipt
	Mailing Address 64 CUPSAW DRIVE			0 6 0 4 Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100294
	RINGWOOD	NJ	07456	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRC	n DDUCT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
Γ	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number	only)		

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 11 / 434           (check only one)
	or for commercial purposes, other than using th	ne name and ad	dress of any political committee to	a solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
∠ A.	Full Name (Last, First, Middle Initial) MS JAYME ANTONOPLOS	Date of Receipt		
	Mailing Address 48 WITTE ROAD			0 6 0 4 Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100371
	HEWITT	NJ	07421	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR EXE	n EC CORR	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
- В.	Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI			Date of Receipt
	Mailing Address 190 WINDSOR PLAC	CE		M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: INCA100300
	MADISON	NJ	07940	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		325.00	
- c.	Full Name (Last, First, Middle Initial) DENNIS AUCH			Date of Receipt
	Mailing Address 1981 E. COVEY VIEV	W COURT		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100676
	SALT LAKE CITY	UT	84106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP		IBURSEMENT	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) <b>v</b>		650.00	1
Γ	SUBTOTAL of Receipts This Page (optional)			100.00
F	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 12/434				
		Use separate schedule(s) for each category of the					
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12				
	[		13 14 15 16 17				
	Any information copied from such Reports and Sta or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any persor or for commercial purposes, other than using the name and address of any political committee to s					
	NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. P	DLITICAL ACTION COMMITTEE (a	a.k.a. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) WILLIAM AX	Date of Receipt					
	Mailing Address 1607 STODDARD ST		M         M         /         D         D         /         Y				
	City	State Zip Code	Transaction ID: INCA100686				
	ROCKFORD	IL 61108	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer ACCREDO HEALTH GROUP	Occupation AVP SALES-HEMOPHILIA					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General	325.00					
	Other (specify) <b>▼</b>						
-	Full Name (Last, First, Middle Initial)		Data of Descipt				
В.	MS CHARLOTTE BABCOCK Mailing Address 2636 SHAKER RD						
	Maining Address 2030 SHAKEN ND		0 6 0 4 2 0 1 1				
	City	State Zip Code	Transaction ID: INCA100655				
	CLEVELAND HEIGHTS	OH 44118	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	<b>C</b>	25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC					
	Receipt For:	Aggregate Year-to-Date V					
	Primary General	325.00					
	Other (specify) 🔻						
C.	Full Name (Last, First, Middle Initial) MS BECKIE BARATKO		Date of Receipt				
	Mailing Address 80 N. WOODLAND ST	REET	0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1				
	City	State Zip Code	Transaction ID: INCA100451				
	ENGLEWOOD	NJ 07631	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROPOSAL UNIT					
	Receipt For:	Aggregate Year-to-Date 🔻					
	Other (specify) ▼	650.00					
	SUBTOTAL of Receipts This Page (optional)		▶ 100.00				
	TOTAL This Period (last page this line number c	nly)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 13 / 434         (check only one)       I1a         X       11a       11b       11c       12
	Any information copied from such Reports and So or for commercial purposes, other than using the	13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)	OLITICAL ACTION COMMITTEE (a.k.a.	
А.	Full Name (Last, First, Middle Initial) MR THOMAS BARATTA	Date of Receipt	
	Mailing Address 69 SKYLINE DR	M         M         /         D         D         /         Y	
		State Zip Code	Transaction ID: INCA100378
	UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	NJ 07458	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
В.	Full Name (Last, First, Middle Initial) MR THOMAS BARDZELL Mailing Address 77 HIGHLAND AVE		Date of Receipt
		State Zia Cada	06 04 2011
	City MIDLAND PARK	State Zip Code NJ 07432	Transaction ID: INCA100501 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	_
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date 325.00	
С.	Full Name (Last, First, Middle Initial) JANE BARLOW		Date of Receipt
	Mailing Address 3 AVALON COURT		0 6 / 0 4 / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100613
	HOPEWELL JUNCTION FEC ID number of contributing federal political committee.	NY 12533	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MEDICAL POLICIES	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)	<b>_</b>	125.00
	TOTAL This Period (last page this line number	only)	

				FOR LINE NUMBER: PAGE 14 / 434			
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	(check only one)			
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
I	• • • • • • • • • • • •			13 14 15 16 17			
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial)			Date of Receipt			
	Mailing Address 452 MEDWAY ROAD	M M / D D / Y Y Y Y 06 04 2011					
	City	State	Zip Code	Transaction ID: INCA100656			
	HIGHLAND HEIGHTS	OH	44143	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		192.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio					
	Receipt For:			_			
	Primary General	Aggregate	e Year-to-Date 🔻	-			
	Other (specify)	0 0	2496.00				
в.	Full Name (Last, First, Middle Initial) MR DAVID BAUGH			Date of Receipt			
	Mailing Address 1813 ADONIS AVE			0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100509			
	HENDERSON	NV	89074	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		58.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio MGR BE	n ENEFIT DELIVERY SYSTEM	IS			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) ♥	0 0	754.00				
C.	Full Name (Last, First, Middle Initial) JAMES BECKER	L		Date of Receipt			
-	Mailing Address 35 BIRCH STREET			0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100517			
	EMERSON	NJ	07630	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR ENT	m FERPRISE BUSINESS INTE				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	325.00				
	SUBTOTAL of Receipts This Page (optional)			275.00			
	TOTAL This Period (last page this line number of	only)					

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 15 / 434         (check only one)       I1a         X       11a
A	ny information copied from such Reports and S r for commercial purposes, other than using the	atements may not be sold or used by any pers	13     14     15     16     17       son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
∠ A.	Full Name (Last, First, Middle Initial) MR DONALD BELFER		Date of Receipt
	Mailing Address 1270A VALLEY ROAD		0 6 / 0 4 / Y Y Y Y 0 1 1
	City	State Zip Code	Transaction ID: INCA100606
	WAYNE FEC ID number of contributing federal political committee.	NJ 07470	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS ANALYSIS	
	Receipt For:	Aggregate Year-to-Date V 325.00	
	Other (specify) ▼		
В.	Full Name (Last, First, Middle Initial) MR STEPHEN BELL		Date of Receipt
	Mailing Address 24 GLENWOOD ROAI	0 6 / D D / Y Y Y Y Y 0 4 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100528
	UPPER SADDLE RIVER FEC ID number of contributing	NJ 07458	Amount of Each Receipt this Period
	federal political committee.		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
— c.	Full Name (Last, First, Middle Initial) MS FRANCINE BELLOFATTO		Date of Receipt
	Mailing Address 2981 NORTHWEST BI	VD	0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100225
	UPPER ARLINGTON FEC ID number of contributing	OH 43221	Amount of Each Receipt this Period
	federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date V 325.00	
	SUBTOTAL of Receipts This Page (optional)		100.00
	TOTAL This Period (last page this line number of		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 16 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17				
	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)				
۷ A.	Full Name (Last, First, Middle Initial) MS THERESA BENSHOOF	Date of Receipt					
	Mailing Address 1332 SE 78TH ST		M         M         /         D         D         /         Y				
	City RUNNELLS	State Zip Code	Transaction ID: INCA100234				
	FEC ID number of contributing federal political committee.	IA 50237	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	-				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00					
- B.	Full Name (Last, First, Middle Initial) MR JEFFREY BENYACAR Mailing Address 300 MAIN ST UNIT 11	4	Date of Receipt				
	BLDG E		06 04 2011				
	City LITTLE FALLS	State Zip Code NJ 07424	Transaction ID: INCA100349 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR BIAC					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00					
- C.	Full Name (Last, First, Middle Initial) MS MARYBETH BERENGUER		Date of Receipt				
	Mailing Address 2 WEXLER CT		0 6 / 0 4 / Y Y Y Y 0 1 1				
	City	State Zip Code	Transaction ID: INCA100393				
	GARNERVILLE FEC ID number of contributing federal political committee.	NY 10923	Amount of Each Receipt this Period 25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL PRODUCT MGMT					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00					
ſ	SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	100.00				
ľ	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 17 / 434
	• • •	Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Ì	NAME OF COMMITTEE (In Full)		
		POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS CARMEN BERG		Date of Receipt
	Mailing Address P O BOX 1373		M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         0 4         2 0 1 1
	City	State Zip Code	Transaction ID: INCA100440
	MEDICAL LAKE	WA 99022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
	Receipt For:	Aggregate Year-to-Date V	1
	Primary General		1
	Other (specify)	325.00	
в.	Full Name (Last, First, Middle Initial) JEAN BERGWALL		Date of Receipt
	Mailing Address 2546 HOLLYHOCK CC	DVE	M · M         /         D · D         Y         Y · Y · Y         Y           06         04         2011         1
	City	State Zip Code	Transaction ID: INCA100698
	GERMANTOWN	TN 38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRODUCT LINE II	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	325.00	
-			-
~	Full Name (Last, First, Middle Initial)		Data of Dagaint
C.			Date of Receipt
	Mailing Address 166 BERKELEY PLAC	E	0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100585
	GLEN ROCK	NJ 07452	Amount of Each Receipt this Period
			Amount of Lach Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL	
	Receipt For:	Aggregate Year-to-Date	
	Primary     General       Other (specify) ▼	325.00	]
[			62.50
ļ	SUBTOTAL of Receipts This Page (optional)	•••••••	
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 18 / 434         (check only one)       11a         X       11a       11b         I       11b       11c       12         I       13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER BERRY			Date of Receipt
	Mailing Address 37-19 VICTORIA RD			0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100208
	FAIR LAWN	NJ	07410	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
			e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼		325.00	]
В.	Full Name (Last, First, Middle Initial) MR DAVID BERRY			Date of Receipt
	Mailing Address 11 COBBLESTONE LA	ANE		0 6 / V Y Y Y 0 6 / 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100377
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
C.	Full Name (Last, First, Middle Initial) INDERPAL BHANDARI	1		Date of Receipt
	Mailing Address 220 ARDSLEY ROAD			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100594
	SCARSDALE	NY	10583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	on IICAL SVCS	
		Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	650.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:     PAGE 19 / 434       (check only one)     11c     12
A	ny information copied from such Reports and S r for commercial purposes, other than using the	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)	POLITICAL ACTION COMMITTEE (a.k.a.	
∠ A.	Full Name (Last, First, Middle Initial) MS EILEEN BIDELL	Date of Receipt	
	Mailing Address 71 WASHINGTON CT.	M M / D D / Y Y Y Y 06 04 2011	
	City	State Zip Code	Transaction ID: INCA100373
	TOWACO	NJ 07082	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARM OPS	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	325.00	
— В.	Full Name (Last, First, Middle Initial) MR ANDREW BIDINOTTO		Date of Receipt
	Mailing Address 7728 GRACE DRIVE		0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100118
	NORTH RICHLAND HIL	TX 76182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS PROCESS CHAMPION	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify)	325.00	
— C.	Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS	1	Date of Receipt
	Mailing Address 4273 BROGDAN FARM	MCOURT	0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100386
	BUFORD	GA 30518	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	325.00	
	SUBTOTAL of Receipts This Page (optional)	·····	62.50
	TOTAL This Period (last page this line number		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 20 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	ay not be sold or used by any perse Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC. F	a. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO	MS CHRISTINE BIZARRO				
	Mailing Address 26 DAYLILY DRIVE			0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100582		
	MOUNT LAUREL	NJ	08054	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP HR	on			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	650.00			
В.	Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN	1		Date of Receipt		
	Mailing Address 4520 LINWOOD LANE			M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: INCA100508		
	DEEPHAVEN	MN	55331	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS		IENT & MKT STRATEGIC D	EV		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-		
	Other (specify) ▼		650.00			
C.	Full Name (Last, First, Middle Initial) MS JESSICA BLANTON	·		Date of Receipt		
	Mailing Address 410 CORNELIA ST. #4	1		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100236		
	BOONTON	NJ	07005	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	1 · · · · · · · · · · · · · · · · · · ·	OPOSAL DEPARTMENT			
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼	0 0	325.00			
	SUBTOTAL of Receipts This Page (optional)			100.00		
	TOTAL This Period (last page this line number	only)				

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 434
			for each category of the	(check only one)
	I EMIZED RECEIPIS		Detailed Summary Page	X 11a 11b 11c 12
Г				13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements ma	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	ightarrow MEDCO HEALTH SOLUTIONS INC. PC	. Medco Health PAC)		
۷ A.	Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN	Date of Receipt		
	Mailing Address 50 NEW ENGLAND DR			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100337
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		_
			ING & PRODUCT DEV	_
	Receipt For:	Aggregate	e Year-to-Date	
	Cher (specify) ▼		650.00	
_		0 0	0 0 0 0 0 0 0	
B.	Full Name (Last, First, Middle Initial) JAMES BLONDIN			Date of Receipt
	Mailing Address 115 AUBURN MEADOWS DR			0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100684
	FORISTELL	МО	63348	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation GENER/	n AL MGR - MULTI BRANCH	_
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼		325.00	
- C.	Full Name (Last, First, Middle Initial) MR STEVEN BLOOM			Date of Receipt
0.	Mailing Address 17818 ARBOR GREEN	E DR		M M / D D / Y Y Y Y
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100336
	ТАМРА	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FIEL		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		650.00	
	Other (specify)			
ſ	SUBTOTAL of Receipts This Page (optional)			125.00
┝				
	TOTAL This Period (last page this line number or	nly)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 22 / 434           (check only one)         11a           X         11a           13         14           15         16
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) KEN BODMER			Date of Receipt
	Mailing Address P.O. BOX 381947			0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100415
	GERMANTOWN	TN	38183	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio COO/SV	n P BUS TRANSFORMATION	1
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	2496.00	]
В.	Full Name (Last, First, Middle Initial) MR MICHAEL BOGDA			Date of Receipt
	Mailing Address 80 LEONA CT			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100511
	LEVITTOWN	NY	11756	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	325.00	]
C.	Full Name (Last, First, Middle Initial) MRS HEATHER BONOME			Date of Receipt
	Mailing Address 203 12TH STREET NE			M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100272
		DC	20002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLI	n NICAL SVCS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)			242.00
	TOTAL This Period (last page this line number o	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 23 / 434 (check only one)		
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$		
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may r e name and addre	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL AC	CTION COMMITTEE (a.k.a	a. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA	Date of Receipt				
	Mailing Address 109 ARBOR PL			0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100155		
	BRYN MAWR	PA	19010	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES	;			
	Receipt For:	Aggregate Y	'ear-to-Date ▼			
	Primary     General       Other (specify) ▼		650.00	]		
в.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX			Date of Receipt		
	Mailing Address 6527 SHORBURGH D	failing Address 6527 SHORBURGH DRIVE				
	City	State	Zip Code	Transaction ID: INCA100066		
	INDIANAPOLIS	IN	46278	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHAR	M PRACTICE			
	Receipt For: Primary General	Aggregate Y	'ear-to-Date ▼	_		
	Other (specify) ▼		650.00			
C.	Full Name (Last, First, Middle Initial) RUSS BOURNE			Date of Receipt		
	Mailing Address 1241 MAGNOLIA ST.			0 6 / D D / Y Y Y Y 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100697		
	TUNICA	MS	38676	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUS D				
	Receipt For:	Aggregate Y	'ear-to-Date ▼			
	Other (specify)		625.00			
	SUBTOTAL of Receipts This Page (optional)	· 	······	125.00		
	TOTAL This Period (last page this line number	only)				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 24 / 434           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         17
K	Any information copied from such Reports and a or for commercial purposes, other than using th	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
م ٩.	Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN	Date of Receipt		
	Mailing Address 5259 FISHERCREST	LN		0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100459
	RICHMOND	VA	23231	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FOR	n MULARY CONSULTING	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	2600.00	
-	Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN			Date of Receipt
	Mailing Address 15 DAWN LANE			M         M         /         D         D         /         Y
	City RINGWOOD	State NJ	Zip Code	Transaction ID: INCA100505
	FEC ID number of contributing federal political committee.	C	07456	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n R STRAT PRODUCT MGM	т
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	]
-	Full Name (Last, First, Middle Initial) MR KEITH BRADBURY			Date of Receipt
	Mailing Address 122 DERFUSS LN			0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100126
	BLAUVELT	NY	10913	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n R DRUG INFO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
Γ		1		275.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	BX)	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 25 / 434 (check only one)		
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports or for commercial purposes, other than using the second sec	and Statements may	v not be sold or used by any perso dress of any political committee to	pn for the purpose of soliciting contributions		
MEDCO HEALTH SOLUTIONS II	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Full Name (Last, First, Middle Initial) A. MS PATRICIA BRANUM			Date of Receipt		
Mailing Address 210 FROG HOLL	Mailing Address 210 FROG HOLLOW ROAD				
City	State	Zip Code	0 6         0 4         2 0 1 1           Transaction ID:         INCA100441		
COATESVILLE	PA	19320	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		85.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	۲ & PROCESS ENGINEERIN	IG		
Receipt For:	Aggregate	Year-to-Date V			
Other (specify)	0 0	1105.00	]		
Full Name (Last, First, Middle Initial) MR JOHN BRENNAN	I		Date of Receipt		
Mailing Address 2 CARMEN LANE	E		M M / D D / Y Y Y Y 06 04 2011		
City	State	Zip Code	Transaction ID: INCA100553		
FLEMINGTON	NJ	08822	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP AUDI				
Receipt For:	Aggregate	Year-to-Date 🔻			
Other (specify)	0 0	650.00			
Full Name (Last, First, Middle Initial) MR PAUL BRESSI			Date of Receipt		
Mailing Address 45 ALDER DR			M M / D D / Y Y Y Y 06 04 2011		
City	State	Zip Code	Transaction ID: INCA100238		
RAMSEY	NJ	07446	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 1	י ECHNOLOGY			
Receipt For:	Aggregate	Year-to-Date 🔻	_		
Other (specify)	0 0	325.00			
SUBTOTAL of Receipts This Page (optio	nal)	<b>b</b>	160.00		
TOTAL This Period (last page this line nu		•			

	ny information copied from such Reports and r for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may		
		e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
<b>/</b> _	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR JAMES BREWER, III	Date of Receipt		
	Mailing Address 1865 BROADHAVEN		0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1	
	City	State	Zip Code	Transaction ID: INCA100297
	MIDDLEBURG	FL	32068	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n - ACCT EXEC	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	650.00	
	Full Name (Last, First, Middle Initial) MS LINDA BRIDGE			Date of Receipt
	Mailing Address 136 BEECH ST			0 6 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INCA100247
	BELLEVILLE	NJ	07109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR N	n MARKETING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]
	Full Name (Last, First, Middle Initial) MR PAUL BRISSON			Date of Receipt
-	Mailing Address 469 MANOR LANE			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100239
	PELHAM MANOR	NY	10803	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRC	n DDUCT DEVELOPMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 325.00	]
	SUBTOTAL of Receipts This Page (optional) .			100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 27 / 434           (check only one)		
	Any information copied from such Reports and Sta or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M				
Α.	Full Name (Last, First, Middle Initial) MR KENNETH BROWN			Date of Receipt		
	Mailing Address 540 GIORDANO DRIVE	06 / 04 / Y Y Y Y 010 / 04 / 2011				
		State	Zip Code	Transaction ID: INCA100152		
	YORKTOWN HEIGHTS FEC ID number of contributing	NY C	10598	Amount of Each Receipt this Period 50.00		
	federal political committee.					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n ERPRISE BUS INTELLIGEN	C∉		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼	0 0	650.00			
в.	Full Name (Last, First, Middle Initial) STEVEN BROWN			Date of Receipt		
	Mailing Address 140 S GROVE PARK			M M / D D / Y Y Y Y 06 04 2011		
	City	State	Zip Code	Transaction ID: INCA100679		
	MEMPHIS FEC ID number of contributing	TN	38117	Amount of Each Receipt this Period		
	federal political committee.	C		25.00		
	Name of Employer ACCREDO HEALTH GROUP	Occupatio	n DDUCT LINE II			
	Receipt For:	Aggregate	e Year-to-Date 🔻	_		
	Primary     General       Other (specify) ▼	0 0	325.00			
C.	Full Name (Last, First, Middle Initial) TRISHA BROWN			Date of Receipt		
	Mailing Address 10 MT. MCKINLEY CT.			M M / D D / Y Y Y Y 06 04 2011		
	City	State	Zip Code	Transaction ID: INCA100713		
	CLAYTON FEC ID number of contributing	CA	94517	Amount of Each Receipt this Period		
	federal political committee.					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	1		
	Other (specify)	0 0	325.00			
	SUBTOTAL of Receipts This Page (optional)			100.00		
	TOTAL This Period (last page this line number c	only)				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 28 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and So or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	Medco Health PAC)	
∠ A.	Full Name (Last, First, Middle Initial) AMANDA BUNDY	Date of Receipt	
	Mailing Address 5812 SEVEN POINTS	TRACE	0 6 / 0 4 / Y Y Y Y 0 1 1
	City	State Zip Code	Transaction ID: INCA100673
	HERMITAGE	TN 37076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIMBURSEMENT	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	650.00	
— В.	Full Name (Last, First, Middle Initial) MR KEVIN BURON		Date of Receipt
	Mailing Address 25 TIMBERLAND		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100307
	ALISO VIEJO	CA 92656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM SYSTEMED SALES	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	650.00	
– C.	Full Name (Last, First, Middle Initial) DANA BUTKUS		Date of Receipt
	Mailing Address 6 STERLING COURT		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100600
	WHIPPANY	NJ 07981	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	325.00	
Γ	SUBTOTAL of Receipts This Page (optional)		125.00
F	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 29 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17					
	Any information copied from such Reports and S or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to s						
		POLITICAL ACTION COMMITTEE (a.k.a.						
۷ A.	Full Name (Last, First, Middle Initial) MRS DOREEN CALDER	Date of Receipt						
	Mailing Address 441 S ELM STREET	0 6 / 0 4 / Y Y Y Y 0 1 1						
	City	State Zip Code	Transaction ID: INCA100063					
	MAYWOOD	NJ 07607	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	40.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRODUCT DEVELOPMENT						
	Receipt For:	Aggregate Year-to-Date 🔻						
	Primary     General       Other (specify) ▼	520.00						
- В.	Full Name (Last, First, Middle Initial) MR FRANK CANNISTRARO		Date of Receipt					
	Mailing Address 146 SEMINOLE AVE		M M / D D / Y Y Y Y 06 04 2011					
	City	State Zip Code	Transaction ID: INCA100164					
	NEW MILFORD	NJ 07646	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE						
	Receipt For: Primary General	Aggregate Year-to-Date ▼						
	Other (specify)	325.00						
- C.	Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI		Date of Receipt					
	Mailing Address 119 WASHINGTON A	06 / D D / Y Y Y Y 06 04 2011						
	City	State Zip Code	Transaction ID: INCA100397					
		NJ 07928	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.		192.31					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & CONTROLLER						
	Receipt For: Primary General	Aggregate Year-to-Date ▼						
	Other (specify)	2500.03						
ſ	SUBTOTAL of Receipts This Page (optional)		257.31					
ľ	TOTAL This Period (last page this line number	only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 30 / 434           (check only one)         X           X         11a         11b         11c         12
ſ	Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma	y not be sold or used by any perso	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F			
A.	Full Name (Last, First, Middle Initial) MS MELISSA CARR	Date of Receipt		
	Mailing Address 8 BRIARCLIFF TERRA	ACE		0 6 0 4 Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100335
	KINNELON FEC ID number of contributing federal political committee.	NJ C	07405	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS		n NNEL & GENERIC MKTING	
	Receipt For:	-	e Year-to-Date	
	Primary General Other (specify) ▼		650.00	
- В.	Full Name (Last, First, Middle Initial) JOSEPH CASACCIA JR			Date of Receipt
	Mailing Address 9788 LIPSEY CV			0 6 0 4 Y Y Y Y 0 1 1
		State	Zip Code	Transaction ID: INCA100376
	GERMANTOWN FEC ID number of contributing federal political committee.	TN C	38139	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	· ·	ARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
- C.	Full Name (Last, First, Middle Initial) MR BARRY CESANEK			Date of Receipt
	Mailing Address 5 LEXINGTON CT			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100317
	SHAMONG FEC ID number of contributing federal political committee.	NJ C	08088	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PRO		
	Receipt For: Primary General Other (specify) ▼	1	e Year-to-Date ▼ 650.00	]
	SUBTOTAL of Receipts This Page (optional)		•••••	125.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 31 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17				
ſ	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions					
۷ A.	Full Name (Last, First, Middle Initial) MR MARVEN CHIN	Date of Receipt					
	Mailing Address 1604 SNOWBERRY D	)R.	0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1				
	City	State Zip Code	Transaction ID: INCA100560				
	WILLIAMSTOWN FEC ID number of contributing federal political committee.	NJ 08094	Amount of Each Receipt this Period 12.50				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR QUALITY	-				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00					
- В.	Full Name (Last, First, Middle Initial) HWEI-CHUNG CHOU		Date of Receipt				
	Mailing Address 36 TANGLEWOOD H	0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1					
	City UPPER SADDLE RIVER	State Zip Code NJ 07458	Transaction ID: INCA100622				
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	_				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00					
- C.	Full Name (Last, First, Middle Initial) MR RAYMOND CHUNG	I	Date of Receipt				
	Mailing Address 186 CROWN POINT F	RD.	M M / D D / Y Y Y Y 06 04 2011				
		State Zip Code	Transaction ID: INCA100567				
	PARSIPPANY FEC ID number of contributing federal political committee.	NJ 07054	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HLTH MGMT	-				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00					
	SUBTOTAL of Receipts This Page (optional)	•	62.50				
	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 32 / 434         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	ay not be sold or used by any perso Idress of any political committee to	pn for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MRS MARLENE CLEMENT Mailing Address 42 MESQUITE VILLAC			Date of Receipt
	Walling Address 42 MESQUITE VILLAG			0 6 0 4 Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100269
	HENDERSON FEC ID number of contributing federal political committee.	NV C	89012	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUS		
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date V 325.00	
- B.	Full Name (Last, First, Middle Initial) MR DANIEL COLE Mailing Address 2901 HIDDEN HILLS V	VAY		Date of Receipt
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100666
	CORONA FEC ID number of contributing federal political committee.	CA	92882	Amount of Each Receipt this Period
	Name of Employer         ACCREDO HEALTH GROUP         Receipt For:         Primary       General         Other (specify) ▼		on AL MGR - MULTI BRANCH e Year-to-Date ▼ 325.00	]
- C.	Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VISTA	\		Date of Receipt
	City VERADALE	State WA	Zip Code 99037	Transaction ID: INCA100285 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	on	
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date V 650.00	]
ſ	SUBTOTAL of Receipts This Page (optional)		••••••	62.50
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	etemente me	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 33 / 434           (check only one)		
	or for commercial purposes, other than using the	solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC. P	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M				
Α.	Full Name (Last, First, Middle Initial) MS SUSAN COLUCCI	Date of Receipt				
	Mailing Address 703 SUCCASUNNA R	M         M         /         D         D         /         Y				
	City	State	Zip Code	Transaction ID: INCA100578		
	LANDING	NJ	07850	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			25.00		
		Occupatio DIR HLT	n H MGMT			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary General		325.00	1		
	Other (specify)	0 0	323.00			
-	Full Name (Last, First, Middle Initial)	Data of Despirat				
В.	WILLIAM CONSIDINE Mailing Address 130 WEST 67TH STRE	Date of Receipt				
	City	State	Transaction ID: INCA100539			
	NEW YORK	NY	Zip Code 10023	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		C		25.00		
	Name of Employer Occupation MEDCO HEALTH SOLUTIONS SR DIR		n TECHNOLOGY			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼		325.00	]		
C.	Full Name (Last, First, Middle Initial) MR ROBERT COOK			Date of Receipt		
	Mailing Address 270 S FRANKLIN TURNPIKE			0 6 / 0 4 2 0 1 1		
	City State		Zip Code	Transaction ID: INCA100138		
	RAMSEY	NJ	07446	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer MEDCO HEALTH SOLUTIONS		Occupation SR DIR	n HLTH CARE OPS			
			e Year-to-Date 🔻			
	Other (specify) ▼		325.00	]		
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 34 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
ſ	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions oscillations solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	a. Medco Health PAC)		
۷ A.	Full Name (Last, First, Middle Initial) JEFFREY COOLE	Date of Receipt		
	Mailing Address 155 ASTON HALL DR	0 6 0 4 Y Y Y Y 0 1 1		
	City EADS	State TN	Zip Code	Transaction ID: INCA100672
	FEC ID number of contributing federal political committee.	TN 38028		Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP TAX A	ND REGULATORY REPO	RT
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 650.00	
- B.	Full Name (Last, First, Middle Initial) ANTONIO CORREIA Mailing Address 19 WILLIAMS LANE	Date of Receipt		
				06 04 2011
	City CHAPPAQUA	State NY	Zip Code 10514	Transaction ID: INCA100596 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
			NESS DEV	
	Receipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date 650.00	]
Full Name (Last, First, Middle Initial) C. MR STEPHEN COURTMAN				Date of Receipt
	Mailing Address 25 FAIRWAY TRAIL			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100271
	SPARTA FEC ID number of contributing	NJ	07871	Amount of Each Receipt this Period
	federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS		RMACY NETWORK MGM	г
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2500.03	]
	SUBTOTAL of Receipts This Page (optional)			292.31
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Si	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER:       PAGE 35 / 434         (check only one)       112         X       11a       11b       11c       12         13       14       15       16       17         on for the purpose of soliciting contributions	
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	solicit contributions from such committee.			
	> MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) JONATHAN COX	Date of Receipt			
	Mailing Address 9638 DOVE SPRING C	0 6 0 4 Y Y Y Y 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100635	
	GERMANTOWN	TN	38139	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUS DEV			
	Receipt For:	Aggregate Year-to-Date ▼			
	Primary     General       Other (specify) ▼	0 0	325.00		
- В.	Full Name (Last, First, Middle Initial) MR ROBERT CRAIG	Date of Receipt			
	Mailing Address 7979 E SANTA CATALINA DR			M + M         /         D - D         /         Y - Y - Y         Y           0 6         0 4         2 0 1 1	
	City	State	Zip Code	Transaction ID: INCA100252	
	SCOTTSDALE	AZ	85255	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		60.00	
	Name of Employer Occupatio MEDCO HEALTH SOLUTIONS EXEC DI		n IR PRODUCT		
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary     General       Other (specify) ▼	0 0	780.00		
- C.	Full Name (Last, First, Middle Initial) MR DAVID CUNNOLD			Date of Receipt	
	Mailing Address 5005 JONQUILLA DRIVE			M + M         /         D + D         Y         Y + Y + Y         Y           0 6         0 4         2 0 1 1         1	
		State	Zip Code	Transaction ID: INCA100593	
		GA	30004	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	on CT MGMT		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻		
	Other (specify) ▼	0 0	325.00		
	SUBTOTAL of Receipts This Page (optional)			110.00	
ſ	TOTAL This Period (last page this line number only)				

				FOR LINE NUMBER: PAGE 36 / 434		
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)		
	ITEMIZED RECEIPTS			X 11a 11b 11c 12		
г				13 14 15 16 17		
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	son for the purpose of soliciting contributions o solicit contributions from such committee.				
ſ						
	MEDCO HEALTH SOLUTIONS INC. PC	a. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) MR ANGELO CUOZZO	Date of Receipt				
	Mailing Address 19 IDA COURT	M         M         /         D         D         /         Y				
	City	Transaction ID: INCA100325				
	STATEN ISLAND	NY	10312	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	<b>C</b> 25				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n XHNOLOGY			
	Receipt For:					
	Primary General	Primary General				
	Other (specify)					
в.	Full Name (Last, First, Middle Initial) MR AJAY DALAL					
	Mailing Address 4603 NEWCASTLE DRI	M M / D D / Y Y Y Y 06 04 2011				
	City	Transaction ID: INCA100588				
	FRISCO	TX	75034	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n NICAL SVCS			
	Receipt For:		e Year-to-Date			
	Primary General	, iggi ogaio				
	Other (specify) <b>v</b>	0.0	325.00			
- С.	Full Name (Last, First, Middle Initial) MR JOHN DALY			Date of Receipt		
0.	Mailing Address 46 BLUEBELL CT	0 6 0 4 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100425		
	PARAMUS	NJ	07652	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n TECHNOLOGY			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary General		325.00			
	Other (specify)					
	SUBTOTAL of Receipts This Page (optional)			75.00		
ŀ						
	TOTAL This Period (last page this line number or	nly)				
SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 37 / 434         (check only one)			
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Any information copied from such Re or for commercial purposes, other that	Any information copied from such Reports and Statements may not be sold or used by any person for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
Full Name (Last, First, Middle Initia MS ROSELIN DANIEL	Full Name (Last, First, Middle Initial) MS ROSELIN DANIEL					
Mailing Address 17 DEVONS	HIRE DRIVE		0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1			
City	State	Zip Code	Transaction ID: INCA100392			
RANDOLPH	NJ	07869	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC D	n IR TECHNOLOGY				
Receipt For:	Aggregate	e Year-to-Date 🔻	_			
Primary       General         Other (specify) ▼	0 0	325.00	]			
Full Name (Last, First, Middle Initian MS MARY DASCHNER	al)		Date of Receipt			
Mailing Address 2926 EWING		M M / D D / Y Y Y Y 06 04 2011				
City	State	Zip Code	Transaction ID: INCA100233			
MINNEAPOLIS	MN	55416	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		192.30			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio GROUP	n PRES RETIREE SOLUTION	NS			
Receipt For:	Aggregate	e Year-to-Date 🔻	_			
Primary       General         Other (specify) ▼	0 0	2499.90	]			
Full Name (Last, First, Middle Initian MR ANDREW DAVIS	al)		Date of Receipt			
Mailing Address 3920 EXCEL #313	Mailing Address 3920 EXCELSIOR BLVD.					
	State	Zip Code	Transaction ID: INCA100249			
SAINT LOUIS PARK	MN	55416	Amount of Each Receipt this Period			
federal political committee.	C		50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MKT	n ING & PRODUCT DEV				
Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	1			
Other (specify)	0 0	650.00				
SUBTOTAL of Receipts This Page	(optional)		267.30			
TOTAL This Period (last page this li	ne number only)					

		<b>I</b>					
	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 38 / 434				
		for each category of the	(check only one)				
		Detailed Summary Page	X 11a 11b 11c 12				
r		13 14 15 16 17					
	Any information copied from such Reports and St	atements may not be sold or used by any persor	n 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.				
ſ	NAME OF COMMITTEE (In Full)						
	> MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)				
	/						
	Full Name (Last, First, Middle Initial)						
Α.	MR BARRY DAVIS	Date of Receipt					
	Mailing Address 11 WEISS DR						
	<u></u>		06 04 2011				
	City	State Zip Code	Transaction ID: INCA100453				
	TOWACO	NJ 07082	Amount of Each Receipt this Period				
	FEC ID number of contributing	<b>C</b>	192.00				
	federal political committee.	C	192.00				
	Name of Employer MEDCO HEALTH SOLUTIONS						
		SVP & GENERAL MGR	4				
	Receipt For:	Aggregate Year-to-Date 🔻					
	Primary General	2496.00					
	Other (specify) 🔻						
-							
-	Full Name (Last, First, Middle Initial)		Delta ( Descript				
В.	WARREN DAVIS		Date of Receipt				
	Mailing Address 3131 SADDLEGAIT CC	)VE					
	<u></u>	7: 0 :	06 04 2011				
	City	State Zip Code	Transaction ID: INCA100696				
	GERMANTOWN	TN 38138	Amount of Each Receipt this Period				
	FEC ID number of contributing	C	50.00				
	federal political committee.						
	Name of Employer	Occupation	-				
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP CORP STRAT BUS DEV					
	Receipt For:	·	-1				
	Primary General	Aggregate Year-to-Date					
	Other (specify)	600.00					
-	Full Nome (Lest First Middle 1-11-11						
C.	Full Name (Last, First, Middle Initial) MR DANIEL DAVISON		Date of Receipt				
0.	Mailing Address 18 BENTLEY DRIVE						
	Maining Address TO DENTLEY DRIVE		06 04 2011				
	City	State Zip Code	Transaction ID: INCA100412				
	FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1				
	MEDCO HEALTH SOLUTIONS	SVP FINANCIAL PLANNING					
	Receipt For:	Aggregate Year-to-Date V	1				
	Primary General						
	Other (specify)	650.00					
1							
	SUBTOTAL of Receipts This Page (optional)		292.00				
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	TOTAL This Daried (lest page this line surface)						
	TOTAL This Period (last page this line number only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER:       PAGE 39 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR CARLTON DEBRULE	Date of Receipt		
	Mailing Address 12 0AKLAND DR			0 6 / 0 4 / Y Y Y Y 0 1 1
	City State		de	Transaction ID: INCA100455
	MONTVALE	<u>NJ 07645</u>		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			55.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUSINESS RE	QUIREMENTS	
	Receipt For:	Aggregate Year-to-Da	te 🔻	
	Primary     General       Other (specify)     ▼		715.00	
В.	Full Name (Last, First, Middle Initial) MS KATHLEEN DEFABIIS			Date of Receipt
	Mailing Address 104 HUDSON AVE			M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Co		Transaction ID: INCA100491
	WALDWICK	NJ 07463		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIENT SVC I	DELIVERY	
	Receipt For:	Aggregate Year-to-Da	te 🔻	
	Other (specify) ▼		325.00	
C.	Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS			Date of Receipt
	Mailing Address N108 W7045 BERKSHI	RE STREET		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Co		Transaction ID: INCA100347
	CEDARBURG	WI 53012		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MG	MT	
	Receipt For: Primary General	Aggregate Year-to-Da	te 🔻	
	Other (specify) ▼		325.00	
	SUBTOTAL of Receipts This Page (optional)			105.00
	TOTAL This Period (last page this line number of	nly)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	itatements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $40/434$ (check only one)X11a11b1314151617on for the purpose of soliciting contributions			
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Any information copied from such Reports and Statements may not be sold or used by any person f or for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
Α.	Full Name (Last, First, Middle Initial) MR PAUL DELLO RUSSO Mailing Address 80 HILLSIDE AVENUE			Date of Receipt			
		Chata	Zin Onda	06 04 2011			
	City GLEN RIDGE	State NJ	Zip Code 07028	Transaction ID: INCA100302 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CC		_			
	Receipt For: Primary General Other (specify) ▼	General		]			
в.	Full Name (Last, First, Middle Initial) MS TONI DEMANSS Mailing Address 32 RED BARN LANE			Date of Receipt			
				06 04 2011			
	City State		Zip Code	Transaction ID: INCA100552			
	WEST MILFORD FEC ID number of contributing federal political committee.	NJ C	07480	Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		_			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	]			
C.	Full Name (Last, First, Middle Initial) MS ANN-MARGARET DEMARCO			Date of Receipt			
	Mailing Address 1 RUGBY ROAD			M         M         /         D         D         /         Y			
		State	Zip Code	Transaction ID: INCA100139			
	CEDAR GROVE     NJ       FEC ID number of contributing federal political committee.     C       Name of Employer MEDCO HEALTH SOLUTIONS     Occupat SR DIF		07009	Amount of Each Receipt this Period			
			n FINANCE	_			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 325.00	]			
	SUBTOTAL of Receipts This Page (optional)			75.00			
	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 41 / 434			
			for each category of the	(check only one)			
			Detailed Summary Page				
Г				13 14 15 16 17			
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	n for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)						
	> MEDCO HEALTH SOLUTIONS INC. PC	angle MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
A.	Full Name (Last, First, Middle Initial) MS MAUREEN DEMPSEY	Date of Receipt					
	Mailing Address 17 RICHWOOD PLACE		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100572			
	DENVILLE	NJ	07834	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		-			
				-1			
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify)		325.00				
-		0 0		1			
В.	Full Name (Last, First, Middle Initial) MR JAMES DENBY			Date of Receipt			
	Mailing Address 78 SHERWOOD ST	M M / D D / Y Y Y Y 06 04 2011					
	City	State	Zip Code	Transaction ID: INCA100250			
	CLIFTON	NJ	07013	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n FINANCE	_			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) <b>▼</b>		325.00				
C.	Full Name (Last, First, Middle Initial) MR PATRICK DENNIS			Date of Receipt			
0.	Mailing Address 2344 FRENCH ALPS A	VE.		M M / D D / Y Y Y Y			
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100195			
	HENDERSON	NV	89044	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General		650.00				
	Other (specify)	0 0		1			
	SUBTOTAL of Receipts This Page (optional)			75.00			
	TOTAL This Period (last page this line number of	nly)	····· ►				

				FOR LINE NUMBER: PAGE 42/434				
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	(check only one)				
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
Г	Any information conied from such Reports and Str	atemente ma	v not be sold or used by any porce	n for the purpose of soliciting contributions				
	or for commercial purposes, other than using the r	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to so						
	/ MEDCO HEALTH SOLUTIONS INC. PO	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M						
A.	Full Name (Last, First, Middle Initial) MR JOHN DERRICO	Date of Receipt						
	Mailing Address 195 HACKENSACK AV	M M / D D / Y Y Y Y 06 04 2011						
	City	State	Zip Code	Transaction ID: INCA100519				
	HARRINGTON PARK	NJ	07640	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n MARKETING	-				
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify)		325.00					
_		0 0		1				
В.	Full Name (Last, First, Middle Initial) JUDITH DERRINGER			Date of Receipt				
	Mailing Address 3306 SHALLOW COVE	0 6 0 4 2 0 1 1						
	City	State	Zip Code	Transaction ID: INCA100682				
	CRESTWOOD	KY	40014	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer ACCREDO HEALTH GROUP		n AL MGR - MULTI BRANCH	7				
	Receipt For:		AL MGR - MULTI BRANCH	-1				
	Primary General	, iggi ogui	325.00	1				
	Other (specify) 🔻	0 0	525.00					
-	Full Name (Last, First, Middle Initial)			Data of Despirit				
C.	MS LAURA DEVEAU Mailing Address 2289 BEDFORD ST AP	T D2		Date of Receipt				
			7. 0. 1	06 04 2011				
	City STAMFORD	State CT	Zip Code 06905	Transaction ID: INCA100338 Amount of Each Receipt this Period				
	FEC ID number of contributing			25.00				
	federal political committee.	C		23.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n PRODUCT MGMT					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼	0.0	325.00					
Γ								
	SUBTOTAL of Receipts This Page (optional)		••••••	75.00				
	TOTAL This Period (last page this line number o	nly)						

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 43 / 434           (check only one)         11a           X         11a           13         14           15         16
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions of solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS KAREN DEZEARN Mailing Address 4740 BRINKLEY LANE	Date of Receipt		
				06 04 2011
	City	State	Zip Code	Transaction ID: INCA100103
	ATLANTA FEC ID number of contributing federal political committee.	GA 30342		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	n L ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 650.00	]
– В.	Full Name (Last, First, Middle Initial) MR FRANK DICALOGERO Mailing Address 36 ARTHUR STREET			Date of Receipt
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100132
	RIDGEFIELD PARK	NJ	07660	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FIN		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
- ).	Full Name (Last, First, Middle Initial) MS TAMARA DIDYK			Date of Receipt
	Mailing Address 136 BEAVER RUN RE	)		M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
		State	Zip Code	Transaction ID: INCA100351
	LAFAYETTE FEC ID number of contributing federal political committee.	NJ	07848	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n FERPRISE OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
	SUBTOTAL of Receipts This Page (optional)			87.50
	TOTAL This Period (last page this line number	only)	····· •	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 44 / 434           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	son for the purpose of soliciting contributions to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	.a. Medco Health PAC)	
<b>A</b> .	Full Name (Last, First, Middle Initial) MR BENJAMIN DIMARCO	Date of Receipt	
	Mailing Address 4 ANN STREET		M M / D D / Y Y Y Y 06 / 04 / 2011
		State Zip Code	Transaction ID: INCA100142
	VERONA FEC ID number of contributing federal political committee.	NJ 07044	Amount of Each Receipt this Period 35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM AUDIT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	
в.	Full Name (Last, First, Middle Initial) MS JUDITH DONNELLY		Date of Receipt
	Mailing Address 3 IRONWORKS ROAD		0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100488
	MONROE FEC ID number of contributing federal political committee.	NY 10950	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date 325.00	
с.	Full Name (Last, First, Middle Initial) MS LYNDA DOREMUS		Date of Receipt
	Mailing Address 16 E HOMESTEAD AV	E	0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
		State Zip Code	Transaction ID: INCA100320
	COLLINGSWOOD FEC ID number of contributing federal political committee.	NJ 08108	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)		▶ 85.00
	TOTAL This Period (last page this line number	only)	•

9	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 45 / 434 (check only one)
I	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	Any information copied from such Reports and St or for commercial purposes, other than using the	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۷ A.	Full Name (Last, First, Middle Initial) MS MERIDITH DORNER			Date of Receipt
	Mailing Address 8010 ORCHARD VIEW	06 04 Y Y Y Y 001 04 2011		
	City	State	Zip Code	Transaction ID: INCA100127
	FOGELSVILLE FEC ID number of contributing federal political committee.	PA C	18051	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on CCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	
– B.	Full Name (Last, First, Middle Initial) MICHEL DUFRESNE			Date of Receipt
	Mailing Address 41ELM ST APT 3P	0 6 0 4 Y Y Y Y 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100531
	MORRISTOWN FEC ID number of contributing federal political committee.	NJ C	07960	Amount of Each Receipt this Period 192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ENT	n ERPRISE BUS INTELLIGEN	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 2499.90	
- C.	Full Name (Last, First, Middle Initial) MR DANA DUNCAN			Date of Receipt
	Mailing Address 125 COMSTOCK TRAI	L		M M / D D / Y Y Y Y 06 04 2011
	City EAST HAMPTON	State CT	Zip Code 06424	Transaction ID: INCA100324
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n TECHNOLOGY	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 1870.00	
ſ	SUBTOTAL of Receipts This Page (optional)			387.30
F	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 46 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	Medco Health PAC)	
Α.	Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY	Date of Receipt	
	Mailing Address 2 DECKER TERRACE	0 6 / 0 4 / Y Y Y Y 0 6 / 0 4 / 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100159
	KINNELON	NJ 07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE	
	Receipt For:	Aggregate Year-to-Date	
	Other (specify) ▼	325.00	
- В.	Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY		Date of Receipt
	Mailing Address 14026 KNOX STREET		M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA100191
	OVERLAND PARK	KS 66221	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES SEGMENT LEADER	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	650.00	
- с.	Full Name (Last, First, Middle Initial) MR MARK DUNN		Date of Receipt
	Mailing Address 2 OLD MILL ROAD		M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA100163
	SANDY HOOK	CT 06482	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	455.00	
ſ	SUBTOTAL of Receipts This Page (optional)	······	110.00
	TOTAL This Period (last page this line number	only)	

			[]	
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 47 / 434 (check only one)
	ITEMIZED RECEIPTS		for each category of the	
	······································		Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PC	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR PETER DURAN	Date of Receipt		
	Mailing Address 875 HARRISTOWN RD		M         /         D         D         /         Y	
	City	State	Zip Code	Transaction ID: INCA100144
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For: Aggregate		e Year-to-Date 🔻	1
			325.00	1
	Other (specify) ▼	0 0	325.00	
В.	Full Name (Last, First, Middle Initial) MS SUZANNE DURY			Date of Receipt
	Mailing Address 147 MIDLAND AVE	M M         /         D D         Y         Y Y         Y </th		
	City	State	Zip Code	Transaction ID: INCA100395
	PARK RIDGE	NJ	07656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on SINESS REQUIREMENTS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	]
C.	Full Name (Last, First, Middle Initial)			Date of Receipt
•	Mailing Address 1400 POPLAR ESTATE	S PKY		0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100678
	GERMANTOWN	TN	38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR RN	on PERF MGMT & IMPROVEMI	
			e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	]
	SUBTOTAL of Receipts This Page (optional)			75.00
			· · · ·	
	TOTAL This Period (last page this line number or	nly)	····· •	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	tatemente ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 48 / 434           (check only one)         11a           X         11a         11b           13         14         15           16         17
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	solicit contributions from such committee.		
Α.	Full Name (Last, First, Middle Initial) MS ARLENE EDLIN Mailing Address 16 CHESTNUT STREE	Date of Receipt		
	0.1	01-1-1	7' - 0 - 1-	06 04 2011
	City CORNWALL	State NY	Zip Code 12518	Transaction ID: INCA100460 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
В.	Full Name (Last, First, Middle Initial) MS JANET EDWARDS Mailing Address N8W27837 WOODRIE			Date of Receipt
			06 04 2011	
	City	State	Zip Code	Transaction ID: INCA100577
	WAUKESHA FEC ID number of contributing federal political committee.	C	53188	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		NICAL SVCS	_
	Primary General Other (specify) ▼		e Year-to-Date 325.00	]
C.	Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS			Date of Receipt
	Mailing Address 379 DURHAM RD			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100151
	WYCKOFF FEC ID number of contributing federal political committee.	NJ C	07481	Amount of Each Receipt this Period
	Name of Employer Occupa MEDCO HEALTH SOLUTIONS VP/GM		n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	]
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 49 / 434         (check only one)       X         X       11a       11b       11c       12				
	Any information copied from such Reports and Si or for commercial purposes, other than using the	atements may not be sold or used by any perso	13     14     15     16     17       on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)						
<b>A</b> .	Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD	Date of Receipt					
	Mailing Address 128 SUMMIT AVENUE	0 6 0 4 Y Y Y Y 0 1 1					
	City	State Zip Code	Transaction ID: INCA100556				
	UPPER MONTCLAIR	NJ 07043	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MEDICARE CHIEF MEDICAL OFFIC	ER				
	Receipt For:	Aggregate Year-to-Date 🔻					
	Other (specify) ▼	650.00					
в.	Full Name (Last, First, Middle Initial) MR FREDERICK ELSTON		Date of Receipt				
	Mailing Address 106 GRAHAM TERRA	0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1					
	City	State Zip Code	Transaction ID: INCA100383				
	SADDLE BROOK	NJ 07663	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	]				
С.	Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN		Date of Receipt				
	Mailing Address 359 LONG HILL ROAD	) EAST	M M / D D / Y Y Y Y 06 04 2011				
		State Zip Code	Transaction ID: INCA100558				
	BRIARCLIFF MANOR FEC ID number of contributing federal political committee.	NY 10510	Amount of Each Receipt this Period 50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP COMMUNICATIONS					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	]				
	SUBTOTAL of Receipts This Page (optional)	······	125.00				
	TOTAL This Period (last page this line number of	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 50 / 434           (check only one)				
	Any information copied from such Reports and St or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k	.a. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN		Date of Receipt				
	Mailing Address 75 TWEED BLVD		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1				
		State Zip Code	Transaction ID: INCA100055				
		NY 10960	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		192.31				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CMO SVP MEDICAL&ANLYTC AFF	FRS				
	Receipt For:	Aggregate Year-to-Date ▼					
	Other (specify) ▼	2500.03					
В.	Full Name (Last, First, Middle Initial) MR SCOTT ERHARDT		Date of Receipt				
	Mailing Address 11540 39TH AVE N		M         M         /         D         D         /         Y				
	City	State Zip Code	Transaction ID: INCA100256				
		<u>MN 55441</u>	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACCT SVCS & ADMIN					
	Receipt For: Primary General	Aggregate Year-to-Date 🔻					
	Other (specify) ▼	650.00					
C.	Full Name (Last, First, Middle Initial) MR YAKOV ESTERLIS		Date of Receipt				
	Mailing Address 100 WINSTON DRIVE 17 C NORTH		$ \begin{array}{c c} M & M \\ 0 & 6 \end{array} \\ \end{array} \left( \begin{array}{c} D & D \\ 0 & 4 \end{array} \right) \left( \begin{array}{c} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{array} \right) $				
	City CLIFFSIDE PARK	State Zip Code NJ 07010	Transaction ID: INCA100493				
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY					
	Receipt For:	Aggregate Year-to-Date V					
	Other (specify) ▼	325.00					
	SUBTOTAL of Receipts This Page (optional)		267.31				
	TOTAL This Period (last page this line number of	nly)	•				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 51 / 434         (check only one)       11a         X       11a       11b       11c       12         I3       14       15       16       17			
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M					
A.	Full Name (Last, First, Middle Initial) MR BRIAN EZROW			Date of Receipt			
	Mailing Address 2524 WIEAND ROAD	0 6 / 0 4 / Y Y Y Y 0 6 / 0 4 / 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA100207			
	QUAKERTOWN	PA	18951	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	m E-COM STRAT & DELI				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	325.00				
В.	Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI			Date of Receipt			
	Mailing Address 15804 SORAWATER E	DR.		0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100173			
	LITHIA	FL	33547	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on CCT EXEC				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	650.00				
С.	Full Name (Last, First, Middle Initial) RICHARD FARIS			Date of Receipt			
	Mailing Address 2020 HEATHER COVE			0 6 0 4 Y Y Y Y 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100694			
	MEMPHIS	TN	38119	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer ACCREDO HEALTH GROUP	-	LTH OUTCOME SOLUTION	s			
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	1			
	Other (specify) ▼	0 0	650.00				
	SUBTOTAL of Receipts This Page (optional)			125.00			
	TOTAL This Period (last page this line number of	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Si	tatemente me	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 52 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) MR DAMIR FATOVIC Mailing Address 176 BEECHWOOD RE	)		Date of Receipt
	City	State	Zip Code	Transaction ID: INCA100295
	ORADELL	NJ	07649	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.08
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FIN		_
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	e Year-to-Date ▼ 352.04	
В.	Full Name (Last, First, Middle Initial) SUSAN FAUST Mailing Address 6614 HERONSWOOD			Date of Receipt
	Maining Address 6614 HERONSWOOD	0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100664
	MEMPHIS	TN	38119	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	IICAL SVCS	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date 650.00	]
C.	Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA			Date of Receipt
	Mailing Address 2354 DOLPHIN CT			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100304
	HENDERSON FEC ID number of contributing federal political committee.	NV C	89074	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n ARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 390.00	]
	SUBTOTAL of Receipts This Page (optional)			92.08
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 53 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17			
	Any information copied from such Reports and St or for commercial purposes, other than using the	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MR THOMAS FEITEL			Date of Receipt			
	Mailing Address 58 APPLE HILL DR			M M / D D / Y Y Y Y 06 04 2011			
	City	State	Zip Code	Transaction ID: INCA100308			
	GILLETTE	NJ	07933	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		192.23			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP CO	n RP MKTG & E-COMM				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General		2498.99	1			
	Other (specify)			1			
в.	Full Name (Last, First, Middle Initial) MR STUART FELDMAN			Date of Receipt			
	Mailing Address 109 MEADOWBROOK	ROAD		0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100052			
	RANDOLPH	NJ	07869	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC D	n IR TECHNOLOGY				
	Receipt For:	Aggregate	e Year-to-Date 🔻	_			
	Primary     General       Other (specify) ▼	0 0	325.00	]			
C.	Full Name (Last, First, Middle Initial) MS DAWN FELDNER	L		Date of Receipt			
	Mailing Address 275 BIRCH STREET			0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100461			
	EMERSON	NJ	07630	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS REQUIREMENT	s			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	0 0	325.00				
	SUBTOTAL of Receipts This Page (optional)			242.23			
	TOTAL This Period (last page this line number of	only)					

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 54 / 434				
			for each category of the	(check only one)				
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$				
[	Any information copied from such Reports and Si	atomonto mo	w not be sold or used by ony perce					
	or for commercial purposes, other than using the	solicit contributions from such committee.						
	> MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)						
Α.	Full Name (Last, First, Middle Initial) FORREST FERRARI	Date of Receipt						
	Mailing Address 1170 SW LIGHTHOUS	E DR		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100706				
	PALM CITY	FL	34990	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		60.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	on OPS ANALYSIS					
	Receipt For:	-		-1				
	Primary General	Aggregate	e Year-to-Date	1				
	Other (specify)	0 0	780.00					
В.	Full Name (Last, First, Middle Initial) MR THOMAS FERRAZZANO			Date of Receipt				
	Mailing Address 464 SPRING AVE.			0 6 0 4 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100413				
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on TECHNOLOGY					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary     General       Other (specify) ▼	0 0	325.00	]				
C.	Full Name (Last, First, Middle Initial) MS EDYTHE FERRIS			Date of Receipt				
0.	Mailing Address 246 SLATER RD			0 6 0 4 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100141				
	TOLLAND	СТ	06084	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR CLINICAL SVCS					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼		600.00	]				
	SUBTOTAL of Receipts This Page (optional)		<b>b</b>	135.00				
			<b>r</b>					
	TOTAL This Period (last page this line number of	oniy)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 55 / 434           (check only one)
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	e name and ad	dress of any political committee to	o solicit contributions from such committee.
А.	Full Name (Last, First, Middle Initial) RONALD FIELMANN		х 	Date of Receipt
	Mailing Address 2061 ARLEEN CT			0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100665
	SCHAUMBURG FEC ID number of contributing federal political committee.	C	60194	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	Occupatio AVP SAL		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
В.	Full Name (Last, First, Middle Initial) MS JENNIFER FINIZIO Mailing Address 58 DARLING AVENUE	I		Date of Receipt
	City	State	Zip Code	Transaction ID: INCA100592
	BLOOMFIELD	NJ	07003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		RKETING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
C.	Full Name (Last, First, Middle Initial) MR DON FISCHER			Date of Receipt
	Mailing Address 10 TRACY CIRCLE			0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100160
	CAMPBELL HALL FEC ID number of contributing federal political committee.	NY C	10916	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)	•		75.00
	TOTAL This Period (last page this line number	only)		

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 56 / 434
	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
	Any information copied from such Reports and Sta	itements may	y not be sold or used by any perso dress of any political committee to	13     14     15     16     17       In for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC			
Z	Full Name (Last, First, Middle Initial)		(u	
Α.	MR EDWARD FISCHER			Date of Receipt
	Mailing Address 465 OLD STONE RD			0 6 0 4 2 0 1 1
	City RIDGEWOOD	State NJ	Zip Code	Transaction ID: INCA100226
	FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ICAL PROD INTEGRATION	
	Receipt For:	-	e Year-to-Date	1
	Primary     General       Other (specify) ▼	0 0	650.00	
— В.	Full Name (Last, First, Middle Initial) MS THERESA FITCH			Date of Receipt
	Mailing Address 180 COOK STREET #107			M M / D D / Y Y Y Y 06 04 2011
		State	Zip Code	Transaction ID: INCA100658
	DENVER FEC ID number of contributing federal political committee.	CO	80206	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n DCT EXEC	-
	Receipt For:	-	Year-to-Date V	
	Primary     General       Other (specify) ▼		325.00	]
_ C.	Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS Mailing Address 1933 MT. OLIVE AGOSTA ROAD			Date of Receipt
	City	State	Zip Code	Transaction ID: INCA100360
		OH	43341	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n HLTH CARE OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	9 Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number or	nly)		

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 57 / 434           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         17
or for c	ommercial purposes, other than using the r	atements may name and ado	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	ME OF COMMITTEE (In Full) DCO HEALTH SOLUTIONS INC. PO		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
<b>A</b> . <u>MR</u>	Name (Last, First, Middle Initial) JOHN FORD	-		Date of Receipt
IVIAI	ling Address 6 SILVER LAKE DRIVE	_		0 6 0 4 Y Y Y Y 0 1 1
City		State	Zip Code	Transaction ID: INCA100323
	AMONG	NJ	08088	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		15.00
Nan MÉ	ne of Employer DCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Rec	eipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	390.00	
	Name (Last, First, Middle Initial) AD FOREMAN			Date of Receipt
Mail	ling Address 9544 DOGWOOD EST	0 6 0 4 Y Y Y Y 0 1 1		
City	State State		Zip Code	Transaction ID: INCA100699
	RMANTOWN	TN	38139	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		25.00
Nan ACC	ne of Employer CREDO HEALTH GROUP	Occupation		
Rec	eipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)		325.00	
	Name (Last, First, Middle Initial) LLEY FORTH			Date of Receipt
Mail	ing Address 115 BAYSIDE COURT			M M / D D / Y Y Y Y 06 04 2011
City		State	Zip Code	Transaction ID: INCA100691
		CA	94804	Amount of Each Receipt this Period
fede	C ID number of contributing eral political committee.	C		25.00
	ne of Employer CREDO HEALTH GROUP		DUCT LINE	
Rec	eipt For: Primary General Other (specify) <b>▼</b>	Aggregate	e Year-to-Date ▼ 325.00	]
SUBT	I OTAL of Receipts This Page (optional)		······	65.00
	L This Period (last page this line number o			-

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 58 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	ay not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) KEVIN FRANCO			Date of Receipt
	Mailing Address 140 BELLAIR ROAD UNIT Q			0 6 / D D / Y Y Y Y 0 4 2 0 1 1
	City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INCA100426
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n FINANCE	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
В.	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO Mailing Address 9 GREEN HILL TRAIL			Date of Receipt
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100375
	TROPHY CLUB	ТХ	76262	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	TIONAL SERVICE CENTER	
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date 2600.00	]
C.	Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL			Date of Receipt
0.	Mailing Address 1434 NARRAGANSET	T BLVD		0 6 0 4 2 0 1 1
	City CRANSTON	State RI	Zip Code 02905	Transaction ID: INCA100184
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on GOV AFFAIRS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 390.00	]
	SUBTOTAL of Receipts This Page (optional)			180.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St	atomonto mo	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 59 / 434           (check only one)
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	solicit contributions from such committee.		
А.	Full Name (Last, First, Middle Initial) FELIX FRUEH	Date of Receipt		
	Mailing Address 14401 FALLING LEAF	DRIVE		0 6 0 4 Y Y Y Y 0 1 1
		State	Zip Code	Transaction ID: INCA100620
	DARNESTOWN FEC ID number of contributing federal political committee.	MD	20878	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP RESI	n EARCH & DEVELOPMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]
В.	Full Name (Last, First, Middle Initial) MR TRACY FURGIUELE Mailing Address 7773 TILLINGHAST DF	RIVE		Date of Receipt
	City	State	Zip Code	06042011 Transaction ID: INCA100444
	DUBLIN	OH	43017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		n HIEF PHARMACIST e Year-to-Date ▼	
	Primary General Other (specify) ▼		1950.00	]
C.	Full Name (Last, First, Middle Initial) ROBERT FURTH			Date of Receipt
	Mailing Address 1450 PORTLAND AVE	NUE		0 6 0 4 Y Y Y Y 0 1 1
	City ST PAUL	State MN	Zip Code	Transaction ID: INCA100675
	FEC ID number of contributing federal political committee.	C	55104	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	Occupatio GENERA	AL MGR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	]
	SUBTOTAL of Receipts This Page (optional)			225.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 60 / 434           (check only one)         11a           X         11a         11b           I3         14         15         16         17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	Medco Health PAC)	
∠ A.	Full Name (Last, First, Middle Initial) MS CARISSA GABOROW		Date of Receipt
	Mailing Address 6 JUHASZ ROAD		0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100344
	NORWALK	CT 06854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS DEVELOPMENT	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	325.00	
- В.	Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI		Date of Receipt
	Mailing Address 24 MOREHOUSE PL	0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100051
	NEW PROVIDENCE	NJ 07974	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP & COUNSEL	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 650.00	
– C.	Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI		Date of Receipt
	Mailing Address 720 N. LARRABEE APT 1701		0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City CHICAGO	State Zip Code	Transaction ID: INCA100504
		IL 60654	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHARMA STRAT & SOLUTIONS	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date  2500.03	
Γ	SUBTOTAL of Receipts This Page (optional)		267.31
	TOTAL This Period (last page this line number of	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	atements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 61 / 434           (check only one)		
	or for commercial purposes, other than using the r	Any information copied from such Reports and Statements may not be sold or used by any person for or for commercial purposes, other than using the name and address of any political committee to soli NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M				
Α.	Full Name (Last, First, Middle Initial) MS PATRICIA GALLAGHER Mailing Address 842 ASHLER CT City COLUMBUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General		CT EXEC Year-to-Date V	Date of Receipt		
В.	Other (specify)         Full Name (Last, First, Middle Initial)         MR BARNEY GALLASSIO         Mailing Address       69 LAKEVIEW DR         City         OLD TAPPAN         FEC ID number of contributing federal political committee.	State NJ C	325.00 Zip Code 07675	Date of Receipt Date of Receipt 0 6 / 0 4 / 2 0 1 1 Transaction ID: INCA100356 Amount of Each Receipt this Period 50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	-	NT RELATIONS Year-to-Date ▼ 650.00			
C.	Full Name (Last, First, Middle Initial) MICHAEL GALVIN Mailing Address 25 BALLYMEADE ROA City HOPEWELL JUNCTION	D State NY	Zip Code 12533	Date of Receipt		
	FEC ID number of contributing federal political committee.		EF INFRASTRUCTURE OF Year-to-Date 2500.03	192.31		
	SUBTOTAL of Receipts This Page (optional)		••••••	267.31		
	TOTAL This Period (last page this line number o	only)				

9	SCHEDULE A (FEC Form 3X)			appodula(a)	FOR LINE NUMBER: PAGE 62/434
			Use separate for each cate	gory of the	(check only one)
-			Detailed Sum	mary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	n for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)				
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL /	ACTION COMI	MITTEE (a.k.a.	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR OMHARAISRIRAM GANGAIKONDAN-IYER				Date of Receipt
	Mailing Address 9 CAIRNES ROAD				M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code		Transaction ID: INCA100543
	MORRIS PLAINS	NJ	07950		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n HNOLOGY		-
	Receipt For:	Aggregate	e Year-to-Date 🔻	,	
	Primary     General       Other (specify) ▼			325.00	
– В.	Full Name (Last, First, Middle Initial) MR PETER GAYLORD				Date of Receipt
	Mailing Address 1201 BRIDGE STREET				0 6 0 4 2 0 1 1
	City	State	Zip Code		Transaction ID: INCA100050
	ASBURY PARK	NJ	07712		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			70.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n EASURY & FIN		
	Receipt For:		Year-to-Date		
	Primary General	- iggi igail		850.00	
	Other (specify) <b>v</b>	0 0	0 0 0 0		
– C.	Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA				Date of Receipt
С.	Mailing Address 20 BROOKSHIRE DR				M M / D D / Y Y Y Y
		Chata	Zin Onda		06 04 2011
	City ROBBINSVILLE	State NJ	Zip Code 08691		Transaction ID: INCA100197 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n		_
	Receipt For:	Aggregate	e Year-to-Date	,	]
	Primary     General       Other (specify) ▼			650.00	
Γ	SUBTOTAL of Receipts This Page (optional)			<b>b</b>	145.00
F	TOTAL This Period (last page this line number o				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 63 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17		
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions of solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N				
Α.	Full Name (Last, First, Middle Initial) LILLIAN GERMAN	Date of Receipt				
	Mailing Address 238A MARYLAND AVE	ENE		0 6 0 4 Y Y Y Y Y Y Y		
		State	Zip Code	Transaction ID: INCA100639		
	WASHINGTON FEC ID number of contributing federal political committee.	DC C	20001	Amount of Each Receipt this Period 30.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR GO	n / AFFAIRS	-		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 390.00			
в.	Full Name (Last, First, Middle Initial) MATTHEW GIBBS			Date of Receipt		
	Mailing Address 4110 N. WESTERN AV UNIT 2S	M         M         /         D         D         /         Y				
	City CHICAGO	State IL	Zip Code 60618	Transaction ID: INCA100608 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		75.00		
	Name of Employer MEDCO HEALTH SOLUTIONS		LINICAL OFFICER			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 975.00	]		
с.	Full Name (Last, First, Middle Initial) MR ROBERT GIBBS			Date of Receipt		
	Mailing Address 544 DENMOOR COUR	RT.		0 6 / 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100124		
	GALLOWAY FEC ID number of contributing federal political committee.	OH C	43119	Amount of Each Receipt this Period 12.50		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]		
	SUBTOTAL of Receipts This Page (optional)			117.50		
	TOTAL This Period (last page this line number of	only)				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 64 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F			
۷ A.	Full Name (Last, First, Middle Initial) MR THOMAS GILSON			Date of Receipt
	Mailing Address 2 PELL FARM ROAD			0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100497
	SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n IENERAL MGR	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	2500.03	
– В.	Full Name (Last, First, Middle Initial) MR SCOTT GILYARD			Date of Receipt
	Mailing Address 305 BERGAMOT DRIV	VE		M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: INCA100056
	MEDINA	MN	55340	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio PRES UI		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)		2499.90	
– c.	Full Name (Last, First, Middle Initial) MR JONAH GITLITZ	I		Date of Receipt
	Mailing Address 43 OVERLOOK RIDG	E		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100136
	OAKLAND FEC ID number of contributing	NJ	07436	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n L ACCT EXEC	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0.0	650.00	
Γ	SUBTOTAL of Receipts This Page (optional)			434.61
F	TOTAL This Period (last page this line number			

SCHEDULE A (FEC I ITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 65 / 434           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         17		
Any information copied from suc	h Reports and Statements ma	ay not be sold or used by any pers	on for the purpose of soliciting contributions osolicit contributions from such committee.		
NAME OF COMMITTEE (In	Full)	ACTION COMMITTEE (a.k.			
Full Name (Last, First, Middle MR JOHN GOBINSKI	Full Name (Last, First, Middle Initial) MR JOHN GOBINSKI				
Mailing Address 28 BARE	BARA DRIVE		M M / D D / Y Y Y Y 06 04 2011		
City	State	Zip Code	Transaction ID: INCA100217		
WARWICK	NY	10990	Amount of Each Receipt this Period		
FEC ID number of contributin federal political committee.	C		25.00		
Name of Employer MEDCO HEALTH SOLUTIC	ONS Occupation SR DIR	on E-COM STRAT & DELI			
Receipt For: Primary Gene		e Year-to-Date 🔻	_		
Other (specify) ▼		325.00			
Full Name (Last, First, Middle MR PAUL GOERDT	e Initial)		Date of Receipt		
Mailing Address 1700 SU	Mailing Address 1700 SUNRISE COURT				
City	State	Zip Code	Transaction ID: INCA100321		
BURNSVILLE	MN	55306	Amount of Each Receipt this Period		
FEC ID number of contributin federal political committee.	C		50.00		
Name of Employer MEDCO HEALTH SOLUTIC		IICAL SVCS			
Receipt For: Primary Gene		e Year-to-Date 🔻	_		
Other (specify) ▼		650.00			
Full Name (Last, First, Middle JOHN GOLDEN	e Initial)		Date of Receipt		
Mailing Address 8702 CH	ELMSFORD LANE		M M / D D / Y Y Y Y 06 04 2011		
City	State	Zip Code	Transaction ID: INCA100680		
<u>SPRING</u>	TX	77379	Amount of Each Receipt this Period		
FEC ID number of contributin federal political committee.			50.00		
Name of Employer ACCREDO HEALTH GROU		ES			
Receipt For: Primary Gene		e Year-to-Date 🔻	_		
Other (specify) ▼		650.00			
SUBTOTAL of Receipts This P	ace (optional)		125.00		
	this line number only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St	for each of Detailed Statements may not be sold	rate schedule(s) category of the Summary Page or used by any person	FOR LINE NUMBER:       PAGE 66 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17         of or the purpose of soliciting contributions			
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	r for commercial purposes, other than using the name and address of any political committee to so					
Α.	Full Name (Last, First, Middle Initial) MR JAMES GRANT, II Mailing Address 1928 BEVERLY LANE	Date of Receipt					
				06 04 2011			
	City BUFFALO GROVE	State Zip Cod	е	Transaction ID: INCA100216			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCIAL INS	IGHTS				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	e ▼ 650.00				
В.	Full Name (Last, First, Middle Initial) LAURIE GREENBERG Mailing Address 27760 WOODLAND GI	REEN		Date of Receipt			
				06 04 2011			
	City BOERNE	State Zip Cod TX 78015	e	Transaction ID: INCA100618 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS	3				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	325.00				
с.	Full Name (Last, First, Middle Initial) MR EDWARD GRIX			Date of Receipt			
	Mailing Address 525 ORANGEBURG R	C		0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1			
	City	State Zip Cod	e	Transaction ID: INCA100242			
	PEARL RIVER	NY 10965		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS		-			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	325.00				
	SUBTOTAL of Receipts This Page (optional)		•	100.00			
	TOTAL This Period (last page this line number of	nly)					

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 67 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
or f	information copied from such Reports and S or commercial purposes, other than using the	Statements may no e name and addres	t be sold or used by any perso s of any political committee to	on for the purpose of soliciting contributions
1	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.		TION COMMITTEE (a.k.a	. Medco Health PAC)
۹	Full Name (Last, First, Middle Initial) MS GINA GRUHN			Date of Receipt
l	Mailing Address 13 WEATHER VANE	DRIVE		0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100293
	CONVENT STATION	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing rederal political committee.	C		50.00
Ī	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM ACC	COUNT SERVICES	
	Receipt For:	Aggregate Ye	ar-to-Date 🔻	_
	Primary     General       Other (specify) ▼		570.00	]
•	Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD	•		Date of Receipt
	Mailing Address 211 NORTH END AVE APT 3C			0 6 / 0 4 / Y Y Y Y 0 1 1
	City NEW YORK	State NY	Zip Code 10282	Transaction ID: INCA100129
-	FEC ID number of contributing ederal political committee.	C		Amount of Each Receipt this Period 50.00
ļ	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CONSU	MER DRIVEN MKTS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 650.00	]
	Full Name (Last, First, Middle Initial) MRS CAROLYN GUGLIELMO			Date of Receipt
-	Mailing Address 42 VETERANS PARK	ŴAY		M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100428
-	PEARL RIVER	NY	10965	Amount of Each Receipt this Period
	FEC ID number of contributing rederal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT		
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 325.00	]
su	BTOTAL of Receipts This Page (optional)		·····	125.00
тс	TAL This Period (last page this line number	r only)	·····	

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	_	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 68 / 434           (check only one)         11a           X         11a         11b           13         14         15         16
4	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
∠ A.	Full Name (Last, First, Middle Initial) MR RICHARD GUIOR			Date of Receipt
	Mailing Address 50 BELLEVUE AVE			0 6 / 0 4 / Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100073
	SUMMIT	NJ	07901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		90.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BIAC		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		1170.00	
— В.	Full Name (Last, First, Middle Initial) MS KAVITHA GULLAPALLI			Date of Receipt
	Mailing Address 67 ATHERTON CT			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: INCA100215
		NJ	07470	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n CHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	325.00	
с. –	Full Name (Last, First, Middle Initial) MS VALERIE HAERTEL			Date of Receipt
	Mailing Address 7 PARSLOE COURT			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100589
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INVE	n STOR RELATIONS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)		650.00	
Γ	SUBTOTAL of Receipts This Page (optional)			165.00
F	TOTAL This Period (last page this line number		•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 69 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17				
	Any information copied from such Reports and Si or for commercial purposes, other than using the	for the purpose of soliciting contributions					
۷ A.	, Full Name (Last, First, Middle Initial) MR RICHARD HALPERN	Date of Receipt					
	Mailing Address 23 MAPLEMOOR LAN	0 6 0 4 Y Y Y Y 0 1 1					
	City	State Zip Code	Transaction ID: INCA100134				
	WHITE PLAINS	NY 10605	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	-				
	Receipt For:	Aggregate Year-to-Date V					
	Other (specify) ▼	325.00					
- В.	Full Name (Last, First, Middle Initial) MR GREGORY HANSEN		Date of Receipt				
	Mailing Address 1659 ISABELLA PARK	M M / D D / Y Y Y Y 06 04 2011					
	City	State Zip Code	Transaction ID: INCA100503				
	CHASKA	MN 55318	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUS TRANSFORMATION & CO					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary     General       Other (specify) ▼	650.00					
- C.	Full Name (Last, First, Middle Initial) SHARON HARRIS	1	Date of Receipt				
	Mailing Address 186 N. WHITE STATIC	DN RD	M M / D D / Y Y Y Y 06 04 2011				
	City	State Zip Code	Transaction ID: INCA100667				
	MEMPHIS	TN 38117	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HR					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00					
ſ	SUBTOTAL of Receipts This Page (optional)		100.00				
ľ	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 70 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) MS SHANA HART	Date of Receipt		
	Mailing Address 20 FAIR GREEN DRIV	E		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100287
		TX	76262	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n L ACCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date	
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	650.00	]
В.	Full Name (Last, First, Middle Initial) MR MARK HARTMANN			Date of Receipt
	Mailing Address 8980 KNOBLE COURT	0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100258
		MN	55347	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR ACC	n CT MGMT	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		325.00	
- С.	Full Name (Last, First, Middle Initial) MR PETER HARTY			Date of Receipt
	Mailing Address 19520 YELLOW WING	G COURT		M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100053
	COLORADO SPRINGS	CO	80908	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP GOV	n ERNMENT AFFAIRS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	2500.03	
	SUBTOTAL of Receipts This Page (optional)			267.31
Ī	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 71 / 434 (check only one)				
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$				
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions				
	MEDCO HEALTH SOLUTIONS INC. P	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N						
Α.	Full Name (Last, First, Middle Initial) DAN HAYES	Date of Receipt						
	Mailing Address 4679 AYRON TERRAC	0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1						
	City	State	Zip Code	Transaction ID: INCA100662				
	PALM HARBOR	FL	34685	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS						
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼		325.00	]				
- B.	Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD			Date of Receipt				
	Mailing Address 13210 N. 11TH AVE.		M M / D D / Y Y Y Y Y 0 6 0 4 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA100156				
	PHOENIX	AZ	85029	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALI						
	Receipt For:	Aggregate	e Year-to-Date 🔻	_				
	Other (specify) ▼		325.00	]				
- c.	Full Name (Last, First, Middle Initial) MR THOMAS HEKKER			Date of Receipt				
	Mailing Address 28 WEST THRID STRE	EET #1332		M M / D D / Y Y Y Y 06 04 2011				
	City	State	Zip Code	Transaction ID: INCA100540				
	SOUTH ORANGE	NJ	07079	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		30.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	<sup>on</sup> TECHNOLOGY					
	Receipt For:	Aggregat	e Year-to-Date 🔻					
	Other (specify)		390.00	]				
ſ	SUBTOTAL of Receipts This Page (optional)			80.00				
ŀ	TOTAL This Period (last page this line number of							

			FOR LINE NUMBER: PAGE 72/434				
	SCHEDULE A (FEC Form 3X)	Use separate schedu	Ile(s) (check only one)				
	ITEMIZED RECEIPTS	for each category of t					
		Detailed Summary Pa	age 13 14 15 16 17				
	Any information copied from such Reports and S	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)	name and address of any political con					
		E (a.k.a. Modeo Health BAC)					
		MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
Α.	Full Name (Last, First, Middle Initial) MR SCOTT HELMUS	Date of Receipt					
	Mailing Address 23 VALLEY RD	0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1					
	City	State Zip Code	Transaction ID: INCA100130				
	SUCCASUNNA	NJ 07876	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	125.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIENT SOLUTIONS					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General		0 0				
	Other (specify)	1625	5.00				
В.	Full Name (Last, First, Middle Initial) MR GLENN HERDLING		Date of Receipt				
р.	Mailing Address 646 JAMES LN						
	City	State Zip Code	Transaction ID: INCA100275				
	RIVER VALE	NJ 07675	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CREATIVE DEVELOPME	ENT				
	Receipt For:	Aggregate Year-to-Date 🔻					
	Primary General	325	.00				
	Other (specify)						
C.	Full Name (Last, First, Middle Initial) MR ERIC HESS		Date of Receipt				
	Mailing Address 10 CARLTON RD		M M / D D / Y Y Y Y 06 04 2011				
	City	State Zip Code	Transaction ID: INCA100231				
	FLANDERS	NJ 07836	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	60.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENGINEERING & OPS					
	Receipt For:	Aggregate Year-to-Date					
	Other (specify)	780	.00				
	SUBTOTAL of Receipts This Page (optional)						
	TOTAL This Period (last page this line number	only)					
		• /					
	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St	atomonto ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 73 / 434           (check only one)			
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	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	o solicit contributions from such committee.			
Α.	Full Name (Last, First, Middle Initial) MS JANE HILDEBRANDT Mailing Address 35 CASCADE WAY City BUTLER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		Zip Code 07405 on OM STRAT & DELIV e Year-to-Date V	Date of Receipt 0 6 0 4 2 0 1 1 Transaction ID: INCA100253 Amount of Each Receipt this Period 25.00			
- B.	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR DANIEL HLUDZINSKI	0 0	325.00	Date of Receipt			
	Mailing Address       385 WASHINGTON ST         City       TAPPAN         FEC ID number of contributing federal political committee.         Name of Employer         MEDCO HEALTH SOLUTIONS         Receipt For:         Primary       General         Other (specify) ▼	State NY C Occupation TECHNI	Zip Code 10983	M M       0       0       4       2       0       1         Transaction ID: INCA100487         Amount of Each Receipt this Period         25.00			
С.	Full Name (Last, First, Middle Initial)         MR STEPHEN HOBSON         Mailing Address       16 LUTH TERRACE         City         WEST ORANGE         FEC ID number of contributing federal political committee.         Name of Employer         MEDCO HEALTH SOLUTIONS         Receipt For:         Primary       General         Other (specify)	- 1	Zip Code 07052 on ARMACY OPS e Year-to-Date V 2496.00	Date of Receipt 0 6 0 4 2 0 1 1 Transaction ID: INCA100359 Amount of Each Receipt this Period 192.00			
	SUBTOTAL of Receipts This Page (optional)			242.00			
	TOTAL This Period (last page this line number of	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 74 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۷ A.	, Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN	Date of Receipt	
	Mailing Address 974 HILLCREST ROAI	0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100429
	RIDGEWOOD	NJ 07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FACILITIES	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	650.00	
- B.	Full Name (Last, First, Middle Initial) MR TIMOTHY HOGAN		Date of Receipt
	Mailing Address 9 HIRLE ST		0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100248
	CORNWALL ON HUDSON	NY 12520	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- C.	Full Name (Last, First, Middle Initial) MR ROGER HOLLAND		Date of Receipt
	Mailing Address 41 SAINT RAPHAEL		0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100352
	LAGUNA NIGUEL	CA 92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
ſ	SUBTOTAL of Receipts This Page (optional)	••••••	125.00
Ī	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 75 / 434           (check only one)         11c         12           X         11a         11b         11c         12           I         10         14         15         16         17
ſ	Any information copied from such Reports and St or for commercial purposes, other than using the	13     14     15     16     17       of or the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)	OLITICAL ACTION COMMITTEE (a.k.a.	
۷ A.	Full Name (Last, First, Middle Initial) MR JOHN HOLLINGER	Date of Receipt	
	Mailing Address 784 CAPE HENRY DR	M M / D D / Y Y Y Y 06 04 2011	
	City	State Zip Code	Transaction ID: INCA100362
	COLUMBUS	OH 43228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS PLANNING	-
	Receipt For:	Aggregate Year-to-Date ▼	]
	Other (specify) ▼	260.00	
- В.	Full Name (Last, First, Middle Initial) MR ROBERT HOLLIS		Date of Receipt
	Mailing Address 88 MILLS STREET		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100237
	MORRISTOWN	NJ 07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR INTERNATL BUSINESS DEV	
	Receipt For: Primary General	Aggregate Year-to-Date V	
	Other (specify) ▼	325.00	
- C.	Full Name (Last, First, Middle Initial) ELIZABETH HOLLOWAY		Date of Receipt
	Mailing Address 9222 RANDLE VALLE	/ DR	M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100689
	CORDOVA	TN 38018	_ Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		40.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation ASSISTANT GENERAL COUNSEL	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	520.00	
ſ	SUBTOTAL of Receipts This Page (optional)		75.00
F	TOTAL This Period (last page this line number of	only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 76 / 434           (check only one)
A	ny information copied from such Reports and s for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL AC	TION COMMITTEE (a.k.a	. Medco Health PAC)
∡.	Full Name (Last, First, Middle Initial) MR MATTHEW HOLMES			Date of Receipt
	Mailing Address 789 WESTON PARK	DR		0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100313
	POWELL	OH	43065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACC	T EXEC	
	Receipt For:	Aggregate Ye	ar-to-Date 🔻	
	Primary     General       Other (specify)		325.00	]
	Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK	1		Date of Receipt
	Mailing Address 5 SUNCLIFF DR			M M / D D / Y Y Y Y 06 / 04 / 2011
	City	State	Zip Code	Transaction ID: INCA100381
	TARRYTOWN	NY	10591	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INTERV	ENTION DELIVERY SYS	т
	Receipt For:	Aggregate Ye	ar-to-Date 🔻	_
	Primary     General       Other (specify) ▼		1040.00	
. —	Full Name (Last, First, Middle Initial) RITA HOLT	1		Date of Receipt
	Mailing Address 1558 N PISGAH ROA	AD.		M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100669
	CORDOVA	TN	38016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIMBL	JRSEMENT	
	Receipt For:	Aggregate Ye	ar-to-Date 🔻	
	Primary     General       Other (specify)     The second		650.00	
	<b>UBTOTAL</b> of Receipts This Page (optional) .		<b>•</b>	155.00
	OTAL This Period (last page this line number		•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       77 / 434         (check only one)       X       11a       11b       11c       12         X       11a       11b       11c       12         13       14       15       16       17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL AC	CTION COMMITTEE (a.k.a	a. Medco Health PAC)		
А.	Full Name (Last, First, Middle Initial) MS CYNTHIA HORN	MS CYNTHIA HORN				
	Mailing Address 9553 ANDREW DR			0 6 / D 0 / Y Y Y Y 0 1 1		
		State OH	Zip Code	Transaction ID: INCA100659		
	TWINSBURG FEC ID number of contributing federal political committee.	C	44087	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CUST S	SVC	_		
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	fear-to-Date ▼ 650.00	]		
В.	Full Name (Last, First, Middle Initial) MR STEVEN HOROWITZ Mailing Address 4 MELISSA COURT			Date of Receipt		
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100583		
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	1 -	MARKETS FINANCE			
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	éear-to-Date ▼ 650.00	]		
C.	Full Name (Last, First, Middle Initial) LYNN HOSTMYER	1		Date of Receipt		
	Mailing Address 6708 N.W. 112TH			0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100674		
	OKLAHOMA CITY FEC ID number of contributing federal political committee.	ок С	73162	Amount of Each Receipt this Period 25.00		
	Name of Employer ACCREDO HEALTH GROUP	Occupation GENERAL	MGR - MULTI BRANCH			
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate Y	rear-to-Date ▼ 325.00	]		
	SUBTOTAL of Receipts This Page (optional)			125.00		
	TOTAL This Period (last page this line number	only)				

	SCHEDULE A (FEC Form 3X)	Use separate sched	Ule(s) FOR LINE NUMBER: PAGE 78 / 434			
	ITEMIZED RECEIPTS	for each category of	the			
		Detailed Summary F				
r			13 14 15 16 17			
	Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may not be sold or used by me and address of any political cor	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.			
ſ	NAME OF COMMITTEE (In Full)					
	> MEDCO HEALTH SOLUTIONS INC. PO	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. I				
, А.	Full Name (Last, First, Middle Initial) MR BERNARD HUKILL	Date of Receipt				
	Mailing Address 17219 CLOVIS	M         M         /         D         D         /         Y				
	City	State Zip Code	Transaction ID: INCA100405			
	HELOTES	TX 78023	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM OPS				
	Receipt For:	Aggregate Year-to-Date V				
	Primary General					
	Other (specify)	130	0.00			
В.	Full Name (Last, First, Middle Initial) MR JEFFREY HULL		Date of Receipt			
	Mailing Address 2616 S 3B'S & K RD		M M / D D / Y Y Y Y 06 04 2011			
	City	State Zip Code	Transaction ID: INCA100363			
	GALENA	OH 43021	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	32.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR HLTH CARE OPS				
	Receipt For:	Aggregate Year-to-Date V				
	Primary General					
	Other (specify) <b>v</b>		6.00			
с.	Full Name (Last, First, Middle Initial) MR DONALD HUMPHREY		Date of Receipt			
	Mailing Address 93 WINCHESTER DRIVE		M M / D D / Y Y Y Y 06 04 2011			
	City	State Zip Code	Transaction ID: INCA100388			
	MONROE	NY 10950	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY				
	Receipt For:	Aggregate Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	32	5.00			
[	SUBTOTAL of Receipts This Page (optional)		107.00			
ŀ						
	TOTAL This Period (last page this line number on	/)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 79 / 434         (check only one)       711         X       11a       11b       11c       12         13       14       15       16       17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.			
		NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M			
Α.	Full Name (Last, First, Middle Initial) MRS KIMBERLY HUMPHRIES	Date of Receipt			
	Mailing Address 10010 POINTE COVE		M M / D D / Y Y Y Y 06 04 2011		
		State Zip Code	Transaction ID: INCA100690		
	LAKELAND FEC ID number of contributing federal political committee.	TN 38002	Amount of Each Receipt this Period 50.00		
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUSINESS PLANNING	_		
	Receipt For:	Aggregate Year-to-Date ▼	1		
	Other (specify)	650.00			
В.	Full Name (Last, First, Middle Initial) MR DAVID ISRAEL		Date of Receipt		
	Mailing Address 730 COLUMBUS AVE		M · M         /         D · D         /         Y · Y · Y · Y         Y		
	City NEW YORK	State Zip Code NY 10025	Transaction ID: INCA100058		
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INT'L STAKEHOLDER RELATION	45		
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 650.00	]		
С.	Full Name (Last, First, Middle Initial) MS SUSAN ITO		Date of Receipt		
	Mailing Address 6366 SW 90TH STRE	ΞT	M M / D D / Y Y Y Y 06 04 2011		
	City	State Zip Code	Transaction ID: INCA100069		
	GAINESVILLE	FL 32608	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date	_		
	Primary General Other (specify) <b>▼</b>	600.00	]		
	SUBTOTAL of Receipts This Page (optional)	······	150.00		
	TOTAL This Period (last page this line number	only)			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 80 / 434         (check only one)       X         X       11a       11b       11c       12         X       13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
⊻ A.	Full Name (Last, First, Middle Initial) MS MARIANNE JACKS	Date of Receipt	
	Mailing Address 329 MORRIS AVENUE	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA100106
	MOUNTAIN LAKES	NJ 07046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	650.00	
- В.	Full Name (Last, First, Middle Initial) BRENDA JACKSON		Date of Receipt
	Mailing Address 7930 WINDER ROAD		0 6 0 4 Y Y Y Y 0 1 1
	City	State Zip Code	Transaction ID: INCA100590
	MACCLENNY	FL 32063	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRODUCT DEVELOPMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
– c.	Full Name (Last, First, Middle Initial) MS TERESE JACKSON		Date of Receipt
0.	Mailing Address 6085 S. PRESTON LA	NE	0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100131
	NEW BERLIN	WI 53151	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	]
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date 650.00	
	SUBTOTAL of Receipts This Page (optional)	······	150.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 81 / 434         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       1		
	or for commercial purposes, other than using th	ny information copied from such Reports and Statements may not be sold or used by any person for commercial purposes, other than using the name and address of any political committee to s				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)		
×.	Full Name (Last, First, Middle Initial) MS MICHELLE JAEGER			Date of Receipt		
	Mailing Address 302 HERMAN TERRA	0 6 / 0 4 / Y Y Y Y 0 6 / 0 4 / 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100545		
	HOPKINS	MN	55343	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	ACCT EXEC			
	Receipt For: Primary General	Aggregate	Year-to-Date V	_		
	Primary     General       Other (specify) ▼	0 0	650.00			
_	Full Name (Last, First, Middle Initial) MR JASON JAMES			Date of Receipt		
	Mailing Address RR 2 BOX 2036	M         M         /         D         D         Y				
	City	State	Zip Code	Transaction ID: INCA100062		
	CANADENSIS	PA	18325	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		35.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHY	N SICIAN ENGAGEMENT			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 455.00	]		
_	Full Name (Last, First, Middle Initial) MR TODD JEFFREY			Date of Receipt		
	Mailing Address 15 ELIZABETH STRE	ET		0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100489		
	DUMONT	NJ	07628	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	RM CONTRACT & CONSUL	TING		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date  650.00			
Γ	SUBTOTAL of Receipts This Page (optional).	-		135.00		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 82 / 434           (check only one)         11c         12           X         11a         11b         11c         12           13         14         15         16         17			
	Any information copied from such Reports and St or for commercial purposes, other than using the	for the purpose of soliciting contributions olicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Me Full Name (Last, First, Middle Initial) MR EDWARD JESELSON				
Α.	MR EDWARD JESELSON					
	Mailing Address 3270 KENNEY DR		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1			
	City	State Zip Code	Transaction ID: INCA100167			
	GERMANTOWN	TN 38139	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	25.00			
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR NATIONAL DISPENSING OPERA				
	Receipt For: Primary General	Aggregate Year-to-Date 🔻				
	Other (specify) ▼	325.00				
в.	Full Name (Last, First, Middle Initial) ROBERT JINKS		Date of Receipt			
	Mailing Address 22 PAGE AVE		0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1			
	City	State Zip Code	Transaction ID: INCA100120			
	LYNDHURST	NJ 07071	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS REQUIREMENTS				
	Receipt For: Primary General	Aggregate Year-to-Date 🔻				
	Other (specify) ▼	650.00				
C.	Full Name (Last, First, Middle Initial) MR WILLIAM JOEL		Date of Receipt			
	Mailing Address 32 VENTOSA DR		0 6 0 4 Y Y Y Y 0 1 1			
	City	State Zip Code	Transaction ID: INCA100298			
	MORRISTOWN	NJ 07960	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANALYTICAL SVCS				
	Receipt For: Primary General	Aggregate Year-to-Date 🔻				
	Other (specify) ▼	325.00				
	SUBTOTAL of Receipts This Page (optional)	······ •	100.00			
	TOTAL This Period (last page this line number of	only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	etomonto	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 83 / 434           (check only one)	
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	solicit contributions from such committee.	
	Full Name (Last, First, Middle Initial)	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N      Eull Name (Lost First Middle Initial)			
Α.	CHARLES JOHNSON Mailing Address 8277 FLORAL SPRING	Date of Receipt			
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100633	
	CORDOVA	TN	38016	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR FINA			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	1	
в.	Full Name (Last, First, Middle Initial) MRS ANNE JOHNSTON			Date of Receipt	
	Mailing Address 700 S. HARBOUR ISLAND BLVD UNIT 432			M M / D D / Y Y Y Y 06 04 2011	
	City	State	Zip Code	Transaction ID: INCA100484	
		FL	33602	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n INFO SERVICE CENTER		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻		
	Other (specify) ▼	0 0	325.00		
с.	Full Name (Last, First, Middle Initial) LATASHA JONES			Date of Receipt	
	Mailing Address 7761 THUNDERSTON			M M / D D / Y Y Y Y 06 04 2011	
	City MEMPHIS	State TN	Zip Code	Transaction ID: INCA100700	
	FEC ID number of contributing federal political committee.	C	38125	Amount of Each Receipt this Period	
	Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR PAY	n 'ER CONTRACTING		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]	
	SUBTOTAL of Receipts This Page (optional)			75.00	
	TOTAL This Period (last page this line number of	only)			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	atomonto ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 84 / 434           (check only one)		
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Any information copied from such Reports and Statements may not be sold or used by any person for for commercial purposes, other than using the name and address of any political committee to sol NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N				
Α.	Full Name (Last, First, Middle Initial) MRS REGINA JONES	Date of Receipt				
	Mailing Address POST OFFICE BOX 75	0995		M M / D D / Y Y Y Y 06 04 2011		
	City LAS VEGAS	State NV	Zip Code	Transaction ID: INCA100230		
	FEC ID number of contributing federal political committee.	C	89136	Amount of Each Receipt this Period		
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP CUST		-		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 975.00			
B.	Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12224 MONTCALM ST	REET		Date of Receipt		
	City	State	Zip Code			
	CARMEL	IN	46032	Transaction ID: INCA100431 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 650.00			
C.	Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD			Date of Receipt		
	Mailing Address 16357 VICTORIA CUR	VE SE		M M / D D / Y Y Y Y 06 04 2011		
	City	State	Zip Code	Transaction ID: INCA100286		
	PRIOR LAKE FEC ID number of contributing federal political committee.		55372	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	LIENT & MKT PROG STRA			
	Receipt For: Primary General Other (specify) ▼	-	Year-to-Date V 650.00			
	SUBTOTAL of Receipts This Page (optional)			150.00		
	TOTAL This Period (last page this line number of	only)				

c	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 85/434
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
I	I EMIZED RECEIPIS		Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma	y not be sold or used by any pers dress of any political committee to	13     14     15     16     17       on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR DENNIS KACKLEY	Date of Receipt		
	Mailing Address 32 EAST RIVERGLEN	0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100365
	WORTHINGTON	OH	43085	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		_
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	]
— В.	Full Name (Last, First, Middle Initial) MR JOHN KAPIOSKI			Date of Receipt
	Mailing Address 8202 MARSH GLEN C	СТ		M · M         /         D · D         /         Y · Y · Y · Y         Y         Y · Y         Y
	City	State	Zip Code	Transaction ID: INCA100411
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n PHARMACY COMPLIANCE	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	650.00	
– c.	Full Name (Last, First, Middle Initial) MR STEVEN KARATY	•		Date of Receipt
	Mailing Address 19 PARK AVE			0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100079
	POMPTON PLAINS	NJ	07444	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP OPS	n PLANNING	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)		325.00	
	SUBTOTAL of Receipts This Page (optional)			87.50

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 86 / 434           (check only one)
	Any information copied from such Reports and Stat or for commercial purposes, other than using the na	tements may	⊥ y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC		ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS MEIRA KATZ	Date of Receipt		
	Mailing Address 820 WEST END AVE APT 7C			M         M         /         D         D         /         Y
	City NEW YORK	State NY	Zip Code 10025	Transaction ID: INCA100573
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n MARKET STRATEGY	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 220.00	
в.	Full Name (Last, First, Middle Initial) MS BECKY KAUS			Date of Receipt
	Mailing Address N81 W18359 TOURS D	R		M         M         /         D         D         /         Y
		State WI	Zip Code	Transaction ID: INCA100266
	MENOMONEE FALLS FEC ID number of contributing federal political committee.	C	53051	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS		CLINICAL SVCS	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ♥ 325.00	]
C.	Full Name (Last, First, Middle Initial) MR WILLIAM KEELER			Date of Receipt
	Mailing Address 63 MOUNTAIN GLEN R	OAD		M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100510
	RINGWOOD FEC ID number of contributing federal political committee.	C	07456	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNI	n CAL SPECIALIST	
	Receipt For: Primary General Other (specify) <b>▼</b>	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			60.00
	TOTAL This Period (last page this line number or	ıly)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 87 / 434         (check only one)
	Any information copied from such Reports and Stat or for commercial purposes, other than using the na	tements may not be sold or used by any perso ame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
А.	Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE		Date of Receipt
	Mailing Address 995 PINES TERR		0 6 / 0 4 / Y Y Y Y 0 1 1
	City FRANKLIN LAKES	State Zip Code NJ 07417	Transaction ID: INCA100169
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCIAL & ANALYTICAL SV0	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
в.	Full Name (Last, First, Middle Initial) MS MICHELLE KEHOE	_	Date of Receipt
	Mailing Address 26-1 FARMHOUSE LAN	E	0 6 0 4 Y Y Y Y 0 1 0 4 2 0 1 1
	City MORRISTOWN	State Zip Code NJ 07960	Transaction ID: INCA100097
	FEC ID number of contributing federal political committee.	NJ 07960	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR INT'L MARKETS	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
C.	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III		Date of Receipt
	Mailing Address 1970 WOODLANDS PL		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100357
	POWELL FEC ID number of contributing federal political committee.	OH 43065	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERAL MGR GROUP	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)	•	125.00
	TOTAL This Period (last page this line number or	ly)	

			FOR LINE NUMBER: PAGE 88 / 434				
	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	(check only one)				
	ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$X$ 11a $\prod$ 11b $\prod$ 11c $\prod$ 12				
		Detailed Summary Page					
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)						
	A MEDCO HEALTH SOLUTIONS INC. P	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
Α.	Full Name (Last, First, Middle Initial)	Date of Receipt					
	Mailing Address 251 POPLAR AVE	0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1					
	City	State Zip Code	Transaction ID: INCA100104				
	HACKENSACK	NJ 07601	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY					
	Receipt For:	Aggregate Year-to-Date V	]				
	Primary General	325.00					
_	Other (specify)						
В.	Full Name (Last, First, Middle Initial) MR PETER KENNY		Date of Receipt				
в.	Mailing Address 111 BEVERLY RD	$\begin{array}{c c} & \text{Date of Receipt} \\ \hline & M & M & / & D & D & / & Y & Y & Y \\ \hline & 0 & 6 & 0 & 4 & 2 & 0 & 1 & 1 \end{array}$					
	City	State Zip Code	Transaction ID: INCA100463				
	FAIRFIELD	NJ 07094	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT	-				
	Receipt For:	Aggregate Year-to-Date 🔻	_				
	Primary General	325.00					
	Other (specify) 🔻	325.00					
С.	Full Name (Last, First, Middle Initial)		Date of Receipt				
	Mailing Address 3403 SPRINGBROOK	M         M         /         D         D         /         Y					
	City	State Zip Code	Transaction ID: INCA100537				
	EDISON	NJ 08820	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST					
	Receipt For:	Aggregate Year-to-Date 🔻					
	Primary     General       Other (specify) ▼	325.00					
	SUBTOTAL of Receipts This Page (optional)	······	75.00				
	TOTAL This Period (last page this line number of	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sche for each category o Detailed Summary	
	Any information copied from such Reports and Si or for commercial purposes, other than using the	atements may not be sold or used by name and address of any political co	y any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITT	EE (a.k.a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) SUE ANN KIRST		Date of Receipt
	Mailing Address 203 GARNET AVENUE		$\begin{array}{c c} M & M \\ 0 & 6 \end{array} / \begin{array}{c} D & D \\ 0 & 4 \end{array} / \begin{array}{c} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{array}$
		State Zip Code	Transaction ID: INCA100712
	NEWPORT BEACH FEC ID number of contributing federal political committee.	CA 92662	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERAL MGR	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 32	25.00
В.	Full Name (Last, First, Middle Initial) MS DONNA KLEIN Mailing Address 1080 FOREST CLIFF [	DRIVE	Date of Receipt
	City	State Zip Code	
	LAKEWOOD	OH 44107	Transaction ID: INCA100657 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼	25.00
С.	Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER		Date of Receipt
	Mailing Address 121 CONKLING TOWN	IROAD	M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100474
	CHESTER FEC ID number of contributing federal political committee.	NY 10918	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date	50.00
	SUBTOTAL of Receipts This Page (optional)		100.00
ľ	TOTAL This Period (last page this line number of	nly)	····· · · · · · · · · · · · · · · · ·

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 90 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) KENNETH KLEPPER			Date of Receipt
	Mailing Address 295 GLEN PLACE	M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: INCA100523
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES &	n CHIEF OPERATING OFFIC	ER
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		2499.90	1
	Other (specify)	0 0		1
в.	Full Name (Last, First, Middle Initial) RICHARD KLUSOVSKY			Date of Receipt
	Mailing Address 1016 FAIRWOOD LAN	IE		M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100681
	ACWORTH	GA	30101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio AVP MA	n NAGED CARE	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	]
C.	Full Name (Last, First, Middle Initial) MS LORI KOEHNEN			Date of Receipt
	Mailing Address 6920 DYLAN LANE			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100331
	INDEPENDENCE	MN	55359	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on GENERIC STRAT & CUST [	ve
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	]
	SUBTOTAL of Receipts This Page (optional)			242.30
	TOTAL This Period (last page this line number of	only)		

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	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:     PAGE 91 / 434       (check only one)     X       X     11a       11b     11c       12
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements ma	y not be sold or used by any person	13 14 15 16 17
	NAME OF COMMITTEE (In Full)			
	> MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL /	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR BRADFORD KOGEN			Date of Receipt
	Mailing Address 555 FORBUSH STREET	Г		0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1
		State	Zip Code	Transaction ID: INCA100465
	BOONTON FEC ID number of contributing federal political committee.	NJ C	07005	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR (	n CLIENT RETAIL	_
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 325.00	
— В.	Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI			Date of Receipt
	Mailing Address 920 CLARK STREET	M M / D D / Y Y Y Y 06 04 2011		
	City	State	Zip Code	Transaction ID: INCA100137
	BOWLING GREEN FEC ID number of contributing federal political committee.	OH C	43402	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
	Full Name (Last, First, Middle Initial) MS ANNE KRAFT			Date of Receipt
	Mailing Address 28 ROSEMILT PLACE			
	City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INCA100611 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR MAF	n RKET SEGMENT SOLUTION	s
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
Γ	SUBTOTAL of Receipts This Page (optional)		••••••	100.00
F	TOTAL This Period (last page this line number or	nly)	·····	

A. F F F F	information copied from such Reports and r commercial purposes, other than using the IAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY Mailing Address 143 DEERFIELD TER MAHWAH EC ID number of contributing ederal political committee. Jame of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	POLITICAL / POLITICAL / RRACE State NJ C Occupatio EXEC DI	dress of any political committee to ACTION COMMITTEE (a.k.a Zip Code 07430	13       14       15       16       17         on for the purpose of soliciting contributions o solicit contributions from such committee.       17         a. Medco Health PAC)       Date of Receipt       2011         Medco Health D: INCA100178       Amount of Each Receipt this Period
A. F N C C F f	JAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY Mailing Address 143 DEERFIELD TEI Dity MAHWAH FEC ID number of contributing ederal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	POLITICAL / RRACE State NJ C Occupatio EXEC DI	ACTION COMMITTEE (a.k.a Zip Code 07430	A. Medco Health PAC) Date of Receipt 0 6 0 4 2 0 1 1 Transaction ID: INCA100178 Amount of Each Receipt this Period
<b>A</b> . <u>№</u> C F f <sup>1</sup>	MS JOANN KRENITSKY Mailing Address 143 DEERFIELD TER Dity MAHWAH EEC ID number of contributing ederal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State NJ C Occupatio EXEC D	07430 n IR PRODUCT	M       M       /       D       D       Y
C <u>P</u> fi	City MAHWAH EC ID number of contributing ederal political committee. Jame of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State NJ C Occupatio EXEC D	07430 n IR PRODUCT	0 6     0 4     2 0 1 1       Transaction ID: INCA100178       Amount of Each Receipt this Period
F fr N	AHWAH EC ID number of contributing ederal political committee. Jame of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	NJ C Occupatio EXEC D	07430 n IR PRODUCT	Amount of Each Receipt this Period
F fr N	EC ID number of contributing ederal political committee.	Occupatio EXEC D	n IR PRODUCT	
_	Receipt For: Primary General	EXEC D	R PRODUCT	<b>-</b>
F	Primary General	Aggregate	e Year-to-Date 🔻	
		0 0	325.00	]
	Full Name (Last, First, Middle Initial) /IR ALEXANDER KRYNICKI			Date of Receipt
N	Aailing Address 60 BEECH ROAD	M M / D D / Y Y Y Y 0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100081
F	RANDOLPH EC ID number of contributing ederal political committee.	NJ C	07869	Amount of Each Receipt this Period
<u>م</u> ۱	lame of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	_
F	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	ull Name (Last, First, Middle Initial)			Date of Receipt
	Aailing Address 495 ISLAND WAY			M M / D D / Y Y Y Y 06 04 2011
	Dity FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INCA100389 Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C		55.00
N N	lame of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INFC	n ) TECHNOLOGY	
F	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date <b>V</b> 715.00	]
SU	BTOTAL of Receipts This Page (optional)		·····•	105.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 93 / 434         (check only one)       11a         X       11a       11b         I3       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
А.	Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN			Date of Receipt
	Mailing Address 2735 YORK RD			M         /         D         D         Y
	City	State	Zip Code	Transaction ID: INCA100445
	COLUMBUS	OH	43221	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP ME	n MBER SVCS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	2600.00	
в.	Full Name (Last, First, Middle Initial) MR DEEPAK KUMAR			Date of Receipt
	Mailing Address 16 NORTH ROAD			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: INCA100340
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		HNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		325.00	
C.	Full Name (Last, First, Middle Initial) MR MANOJ KUMAR			Date of Receipt
	Mailing Address 7 SUNRISE WAY			0 6 / D D / Y Y Y Y 0 1 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100379
	TOWACO	NJ	07082	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 1	SS PROCESS CHAMPION	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0.0	390.00	1
	SUBTOTAL of Receipts This Page (optional)			255.00
	TOTAL This Period (last page this line number	only)		

				FOR LINE NUMBER: PAGE 94 / 434
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
-				13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR FRANK KURILLA	Date of Receipt		
	Mailing Address 88 WATCH HILL ROAI	0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100599
	HACKETTSTOWN	NJ	07840	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	on CT MGMT	_
	Receipt For:	Aggregate	e Year-to-Date 🔻	-
	Primary General		325.00	
_	Other (specify)	0 0		
в.	Full Name (Last, First, Middle Initial) MR MARK LANDY			Date of Receipt
	Mailing Address 18 LADIK PL			M · M         /         D · D         /         Y · Y · Y · Y         Y
	City	State	Zip Code	Transaction ID: INCA100385
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SVC	DELIVERY SYSTEM	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼		975.00	
-	Full Name (Last, First, Middle Initial)			Data of Dessint
C.	MR EDWARD LAPUSHCHIK Mailing Address 2 OLD LANE			Date of Receipt
				06 04 2011
	City	State	Zip Code	Transaction ID: INCA100533
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	on CAL SPECIALIST	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	
[		<u> </u>		125.00
ŀ	SUBTOTAL of Receipts This Page (optional)		••••••	
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Statements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 95 / 434         (check only one)
	or for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR MARCELO LAROSA			Date of Receipt
	Mailing Address 162 HILLTOP ROAD			0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100105
	MONROE	NY	10950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	LIENT SVC DELIVERY	_
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	]
В.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 1100 KIMBERLY COU	IRT		0 6 0 4 Y Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100346
	ROSEVILLE	CA	95661	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR G	OVERNMENT AFFAIRS	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	1300.00	
с.	Full Name (Last, First, Middle Initial) MICHELE LAW			Date of Receipt
	Mailing Address 600 KINGFRED DR			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100683
	NORTH HUNTINGDON	PA	15642	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR TRC		
	Receipt For:	Aggregate	Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	325.00	]
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number	only)		

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	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 96 / 434
	· · · · ·	Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
		Detailed Summary Page	
	Any information copied from such Reports and Statemer	ts may not be sold or used by any persor	for the purpose of soliciting contributions
	or for commercial purposes, other than using the name a	and address of any political committee to a	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	MEDCO HEALTH SOLUTIONS INC. POLITI		Medeo Health PAC)
			Medeo Health (AO)
Α.	Full Name (Last, First, Middle Initial) PAUL LEAPO	Date of Receipt	
<i>,</i>	Mailing Address 1 CHRISTIAN DRIVE		
			06 04 2011
	City St	ate Zip Code	Transaction ID: INCA100520
	EAST BRUNSWICK N	J 08816	Amount of Each Receipt this Period
	FEC ID number of contributing		00.00
	federal political committee.		26.00
	Name of Employer Occ MEDCO HEALTH SOLUTIONS	-	
	MEDCO HEALTH SOLUTIONS SR	DIR TECHNOLOGY	
	Receipt For: Agg	regate Year-to-Date 🔻	
	Primary General		
	Other (specify)	338.00	
в.	Full Name (Last, First, Middle Initial) EMMA LEVIN		Date of Receipt
D.	Mailing Address 18 SALEM RD		
	Maining Address To SALEMIND		06 04 2011
	City St	ate Zip Code	Transaction ID: INCA100587
	EAST BRUNSWICK N	J 08816	Amount of Each Receipt this Period
	FEC ID number of contributing		
	federal political committee.		25.00
		upation	
			_
		regate Year-to-Date	
	Primary General	325.00	
	Other (specify) 🔻		
	Full Name (Last, First, Middle Initial)		
C.	MR ROBERT LONG		Date of Receipt
	Mailing Address 18 HARLIND TERRACE		M M / D D / Y Y Y Y
			06 04 2011
	City St	ate Zip Code	Transaction ID: INCA100334
	RAMSEY N	J 07446	Amount of Each Receipt this Period
	FEC ID number of contributing		50.00
	federal political committee.		
	Name of Employer	upation	-
		NATL ACCT EXEC	
		regate Year-to-Date V	1
	Primary General		
	Other (specify)	650.00	
	SUBTOTAL of Receipts This Page (optional)		101.00
		<b>r</b>	
	TOTAL This Period (last page this line number only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sche for each category o Detailed Summary	of the
	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or used b name and address of any political c	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	TEE (a.k.a. Medco Health PAC)	
⊻ A.	Full Name (Last, First, Middle Initial) DAVID LOSCHINSKEY	Date of Receipt	
	Mailing Address 4500 MT GILLESPIE	M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         0 4         2 0 1 1	
		State Zip Code	Transaction ID: INCA100687
	LAKELAND FEC ID number of contributing federal political committee.	TN 38002	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BIAC	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	350.00
– В.	Full Name (Last, First, Middle Initial) MICHELLE LOTT		Date of Receipt
	Mailing Address 232 EVERGREEN CT	M M / D D / Y Y Y Y 06 04 2011	
	City	State Zip Code	Transaction ID: INCA100562
	MOUNTAINSIDE FEC ID number of contributing federal political committee.	NJ 07092	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PROJECT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	325.00
– C.	Full Name (Last, First, Middle Initial) MR BRICE LOVE		Date of Receipt
	Mailing Address 2390 BRANDON RD		M M / D D / Y Y Y Y 06 04 2011
	City COLUMBUS	State Zip Code OH 43221	Transaction ID: INCA100290
	FEC ID number of contributing federal political committee.	OH 43221	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TRC	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	325.00
Γ	SUBTOTAL of Receipts This Page (optional)		
	TOTAL This Period (last page this line number	only)	· · · · · · · · · · · · · · · · · · ·

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 98 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) MR ROSS LUCE	Date of Receipt		
	Mailing Address 1066 WEST GROVE C	т		0 6 0 4 Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100190
	GIBSONIA	PA 15044		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	780.00	
- В.	Full Name (Last, First, Middle Initial) ERICA MACK			Date of Receipt
	Mailing Address 221 DELTA DRIVE	M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: INCA100677
	MARION	AR	72364	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR ENT	n ERPRISE OPS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	225.00	
- C.	Full Name (Last, First, Middle Initial) MS VERONA MACMAHON	I		Date of Receipt
	Mailing Address 1504 WEST CULLOM UNIT G	AVE		M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100490
			60613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n ACCT MGMT OPS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
[	SUBTOTAL of Receipts This Page (optional)		•••••	80.00
ľ	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 99 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	name and ad	dress of any political committee to	solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
A.	Full Name (Last, First, Middle Initial) MR MUDIT MAHESHWARI	Date of Receipt					
	Mailing Address 14 WATCHUNG TRL			0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100255			
	BRANCHBURG	NJ	08876	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation					
			e Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	0 0	325.00				
В.	Full Name (Last, First, Middle Initial) MR KENNETH MALLEY	1		Date of Receipt			
	Mailing Address 764 W. SADDLE RIVE	R ROAD		M M / D D / Y Y Y Y 06 04 2011			
	City	State	Zip Code	Transaction ID: INCA100232			
	HO HO KUS	NJ	07423	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		192.00			
	Name of Employer MEDCO HEALTH SOLUTIONS		GENERAL MGR				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0.0	2496.00				
C.	Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO	•		Date of Receipt			
	Mailing Address 33 HICKORY TAVERN	I RD		0 6 0 4 Y Y Y Y Y 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100071			
	<u>GILLETTE</u>	NJ	07933	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA	NCE				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	650.00				
	SUBTOTAL of Receipts This Page (optional)			267.00			
	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 100 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17			
	Any information copied from such Reports and Si or for commercial purposes, other than using the	n for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	Medco Health PAC)				
۷ A.	Full Name (Last, First, Middle Initial) MS MICHELLE MANOLOVIC	Date of Receipt				
	Mailing Address 28640 BRAELOCH CC	URT	M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         0 4         2 0 1 1			
	City	State Zip Code	Transaction ID: INCA100100			
		IL 60044	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	30.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES				
	Receipt For:	Aggregate Year-to-Date 🔻				
	Other (specify) ▼	390.00				
- В.	Full Name (Last, First, Middle Initial) MS ILENE MARCUS		Date of Receipt			
	Mailing Address 97 BLUEBERRY DR		M         M         /         D         D         /         Y			
	City	State Zip Code	Transaction ID: INCA100399			
	WOODCLIFF LAKE DR	NJ 07675	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE				
	Receipt For:	Aggregate Year-to-Date ▼				
	Primary     General       Other (specify) ▼	325.00				
- C.	Full Name (Last, First, Middle Initial) MR JOSEPH MARINELLI		Date of Receipt			
	Mailing Address 351 SOUND BEACH A	VENUE	0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1			
	City	State Zip Code	Transaction ID: INCA100174			
	OLD GREENWICH	CT 06870	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MEDICARE OPS				
	Receipt For: Primary General	Aggregate Year-to-Date 🔻				
	Other (specify) ▼	325.00				
ſ	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 101 / 434           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		
A.	Full Name (Last, First, Middle Initial) LORI MARINO	Date of Receipt	
	Mailing Address 31 UNDERWOOD DRI	M         M         /         D         D         /         Y	
		State Zip Code	Transaction ID: INCA100607
	WEST ORANGE FEC ID number of contributing federal political committee.	NJ 07052	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST GENERAL COUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 600.00	
В.	Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL-IGUNBOR Mailing Address W144 N7150 TERRAC	EDRIVE	Date of Receipt
	City		06 04 2011
		State Zip Code WI 53051	Transaction ID: INCA100262 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
с.	Full Name (Last, First, Middle Initial) MR JOSEPH MARSIGLIANO		Date of Receipt
	Mailing Address 11 ECHO HILL ROAD		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1
		State Zip Code	Transaction ID: INCA100609
	MONTVALE FEC ID number of contributing federal political committee.	NJ 07645	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)		125.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 102 / 434
			Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
	Any information copied from such Reports and Si or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
ľ				
	> MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	I. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MRS SHELLY MARTIN			Date of Receipt
	Mailing Address 9536 DOE MEADOW I	DR		M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100693
	GERMANTOWN	TN	38139	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR HR	pn	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)		325.00	1
		0 0	0 0 0 0 0 0 0 0	1
- В.	Full Name (Last, First, Middle Initial) MR TODD MARTIN			Date of Receipt
	Mailing Address 11825 SHEPPARDS C			
	City	State	Zip Code	Transaction ID: INCA100209
	CLARKSVILLE	MD	21029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS			
	Receipt For:		e Year-to-Date V	
	Primary General		2499.90	1
	Other (specify) 🔻	0 0		1
- С.	Full Name (Last, First, Middle Initial) MR WILLIAM MARTIN			Date of Receipt
С.	Mailing Address 2601 FOX HLL CIRCLI	E EAST		M M / D D / Y Y Y Y
	City	State	Zip Code	
	GERMANTOWN	TN	38139	Transaction ID: INCA100615 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio GROUP	on VP BUS DEV	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	650.00	]
	SUBTOTAL of Receipts This Page (optional)	l		267.30
ŀ				
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 103 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR EDWARD MARTINEZ	Date of Receipt		
	Mailing Address 35 SALTER PLACE			0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City State		Zip Code	Transaction ID: INCA100541
	MAPLEWOOD	NJ	07040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	<sup>n</sup> PRODUCT MGMT	
			e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
в.	Full Name (Last, First, Middle Initial) MR JEFFREY MAY			Date of Receipt
	Mailing Address 137 WASHINGTON A	/E		06 / 04 / Y Y Y Y 011
	City	State	Zip Code	Transaction ID: INCA100433
	HILLSDALE	NJ	07642	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	-	ARMA STRAT & SOLUTION	s
	Receipt For: Primary General	Aggregate	e Year-to-Date	-
	Other (specify) ▼	0 0	2499.90	
C.	Full Name (Last, First, Middle Initial) MR TERENCE MAYTIN			Date of Receipt
•	Mailing Address 496 FRANKLIN AVE			M M / D D / Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100203
		NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	OM STRATEGY & DELIVER	(
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	1
	Other (specify)	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)			242.30
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 104 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	o solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE			Date of Receipt
	Mailing Address 19 FARMINGTON CO	0 6 0 4 Y Y Y Y 0 1 1		
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INCA100240
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	1	ES AND MARKETING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
- В.	Full Name (Last, First, Middle Initial) THOMAS MCCANN Mailing Address 9600 DOVE SPRING	CV		Date of Receipt
	City	State	Zip Code	
	<u>GERMANTOWN</u>	TN	38139	Transaction ID: INCA100695 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP SALE		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	]
– C.	Full Name (Last, First, Middle Initial) MS SHANNON MCCRUDDEN			Date of Receipt
	Mailing Address 4 MANCHESTER COL	M M / D D / Y Y Y Y 06 04 2011		
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INCA100542 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			125.00
ľ	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	atomonte ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 105 / 434           (check only one)
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD Mailing Address 0-45 27TH ST			Date of Receipt
	City	State	Zip Code	Transaction ID: INCA100382
	FAIR LAWN	NJ	07410	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n CHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	325.00	]
в.	Full Name (Last, First, Middle Initial) MRS TRACEY MCGUIRE			Date of Receipt
	Mailing Address 19 FARMINGTON COL	JRT		0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100080
	RAMSEY FEC ID number of contributing federal political committee.	C	07446	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLIN	n NICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
C.	Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH			Date of Receipt
	Mailing Address 87 ROSELAWN RD			M M / D D / Y Y Y Y 06 / 04 2011
		State	Zip Code	Transaction ID: INCA100345
	HIGHLAND MILLS FEC ID number of contributing federal political committee.	C	10930	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST GI	n ENERAL COUNSEL	
	Receipt For: Primary General Other (specify) $\blacksquare$	Aggregate	e Year-to-Date ▼ 2496.00	]
	SUBTOTAL of Receipts This Page (optional)			242.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 106 / 434         (check only one)       III         X       11a       11b       11c       12         I3       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR WILLIAM MCLAUGHLIN Mailing Address 8 BATES CIRCLE	Date of Receipt		
	City	State	Zip Code	Transaction ID: INCA100500
	FLORIDA	NY 10921		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	325.00	
В.	Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA			Date of Receipt
	Mailing Address 112 GREEN TERRACE	EWAY		0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100483
	WEST MILFORD	NJ	07480	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS		SINESS OPS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	2500.03	
C.	Full Name (Last, First, Middle Initial) MR ERIC MCPHERSON			Date of Receipt
	Mailing Address 15008 EAGLEPARK PL	-		0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100476
	LITHIA	FL	33547	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	-	ARM PRACTICE	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-
	Other (specify)	0.0	325.00	]
	SUBTOTAL of Receipts This Page (optional)		······	229.81
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 107 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
A.	Full Name (Last, First, Middle Initial) CRAIG MEARS	Date of Receipt					
	Mailing Address 106 MEADOWLAKE C	Т		0 6 / D 0 4 / Y Y Y Y 2 0 1 1			
		State	Zip Code	Transaction ID: INCA100668			
	HENDERSONVILLE FEC ID number of contributing federal political committee.	TN C	37075	Amount of Each Receipt this Period 50.00			
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP SALI		_			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00				
В.	Full Name (Last, First, Middle Initial) MRS WENDY MELLO Mailing Address 5147 BLUE SPRUCE	DR		Date of Receipt			
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100145			
	YPSILANTI	MI	48197	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		20.00			
	Name of Employer MEDCO HEALTH SOLUTIONS		TING & STRATEGIC ANAL				
	Receipt For: Primary General Other (specify) ♥	Aggregat	e Year-to-Date 260.00	]			
с.	Full Name (Last, First, Middle Initial) MS LAURA MENVILLE Mailing Address 23 UNION HILL RD	I		Date of Receipt			
	City	State	Zip Code	Transaction ID: INCA100512			
	MORRIS PLAINS	NJ	07950	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	1 I	CHNOLOGY				
	Receipt For: Primary General Other (specify)	Aggregat	e Year-to-Date 325.00				
	SUBTOTAL of Receipts This Page (optional)			95.00			
	TOTAL This Period (last page this line number	only)					

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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 108 / 434				
	ITEMIZED RECEIPTS		for each category of the	(check only one)				
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$				
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	n for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)							
	MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)						
Α.	Full Name (Last, First, Middle Initial) MS BARBARA MENZEL	Date of Receipt						
	Mailing Address 921 AMARYLLIS AVE			0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100128				
	ORADELL	NJ	07649	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	m BUS PLANNING & ADMIN					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General		325.00	1				
	Other (specify) <b>v</b>	0 0	323.00					
В.	Full Name (Last, First, Middle Initial) DANETTE MEREDITH			Date of Receipt				
	Mailing Address 600 W 2ND AVE	M         M         /         D         D         /         Y						
	City	State	Zip Code	Transaction ID: INCA100661				
	DERRY	PA	15627	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer ACCREDO HEALTH GROUP	Occupation AVP SA						
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼	0 0	325.00	]				
C.	Full Name (Last, First, Middle Initial) MR JEFFREY MESAROS			Date of Receipt				
	Mailing Address 15905 KENT CT.			0 6 0 4 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100315				
	TAMPA	FL	33647	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ATTORN		-				
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼	0 0	325.00	]				
	SUBTOTAL of Receipts This Page (optional)			75.00				
	TOTAL This Period (last page this line number of	""(y)						
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 109 / 434 (check only one)				
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	ITEMIZED RECEIPTS		for each category of the	$X$ 11a $\Box$ 11b $\Box$ 11c $\Box$ 12				
			Detailed Summary Page					
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) MR DAN MILKENS	Date of Receipt						
	Mailing Address 826 DOWNING STREE	M         M         /         D         D         /         Y						
	City	State	Zip Code	Transaction ID: INCA100332				
	NORTHBROOK	IL	60062	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation						
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General		325.00	1				
	Other (specify) <b>v</b>	0 0	323.00					
В.	Full Name (Last, First, Middle Initial) DAVID MILLER			Date of Receipt				
Б.	Mailing Address 7 CLOVER LANE			M M / D D / Y Y Y Y 0 6 0 4 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100078				
	RANDOLPH	NJ	07869	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	OR RELATIONS					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary     General       Other (specify) ▼		650.00	]				
C.	Full Name (Last, First, Middle Initial) EDDY MILLER			Date of Receipt				
•	Mailing Address 450 ARCARO WAY APT: 101			0 6 0 4 Y Y Y Y Y 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100642				
	CORDOVA	TN	38018	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n TECHNOLOGY					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General Other (specify) ▼	0 0	325.00	]				
	SUBTOTAL of Receipts This Page (optional)			100.00				
	TOTAL This Period (last page this line number of		<b>r</b>					
	· · ·	• ·						

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 110 / 434           (check only one)         (check 110 / 434           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma	ay not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
~ ۹.	Full Name (Last, First, Middle Initial) MRS KAREN MILLER			Date of Receipt
	Mailing Address 34 MACKENZIE LANE	M M / D D / Y Y Y Y 06 04 2011		
	City	State	Zip Code	Transaction ID: INCA100070
	DENVILLE FEC ID number of contributing federal political committee.	NJ C	07834	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	on COMPLIANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
- 3.	Full Name (Last, First, Middle Initial) PAMELA MILLER	-		Date of Receipt
	Mailing Address 158 SUMMIT AVENUE	=		0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City HACKENSACK	State NJ	Zip Code 07601	Transaction ID: INCA100532 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		55.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 · · · · · · · · · · · · · · · · · · ·	TAIN & COMMUNITY INVES	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 715.00	]
- ).	Full Name (Last, First, Middle Initial) MR BHUPESH MISTRY			Date of Receipt
	Mailing Address 92 REDSTONE DR			M M / D D / Y Y Y Y 06 04 2011
	City PARSIPPANY	State NJ	Zip Code 07054	Transaction ID: INCA100087
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNI	on CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
	SUBTOTAL of Receipts This Page (optional)			105.00
F	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 111 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	Medco Health PAC)	
۷ A.	Full Name (Last, First, Middle Initial) MR DAVID MITCHELL	Date of Receipt	
	Mailing Address 222 WEST 14TH STRE APT. 4B	0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100557
	NEW YORK FEC ID number of contributing federal political committee.	NY 10011	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING & PRODUCT DEV	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
- B.	Full Name (Last, First, Middle Initial) MONALISA MOHANTY Mailing Address 1574 WHITMAR PLAC	E	Date of Receipt
	Maining Address 1374 WHITMAR PLAC		0 6 / 0 4 / Y Y Y Y 0 0 1 1
	City MEMPHIS	State Zip Code	Transaction ID: INCA100640
	FEC ID number of contributing federal political committee.	TN 38120	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR MARKETING	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- C.	Full Name (Last, First, Middle Initial) MS JULIANA MOLEK		Date of Receipt
	Mailing Address 8620 LAKE RILEY DRI	VE	0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100218
	CHANHASSEN FEC ID number of contributing federal political committee.	MN 55317	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR SPECIAL MARKETS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 650.00	
ſ	SUBTOTAL of Receipts This Page (optional)	•	125.00
	TOTAL This Period (last page this line number of	only)	

	TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:     PAGE 112 / 434       (check only one)     X       X     11a       13     14       15     16       17
/ (	Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
× 4.	Full Name (Last, First, Middle Initial) ROBERT MOLONEY			Date of Receipt
	Mailing Address 24 ABBINGTON TERF	0 6 / 0 4 / Y Y Y Y 0 6 / 0 4 / 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100574
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNI	<sup>n</sup> CAL SPECIALIST	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)	0 0	325.00	
	Full Name (Last, First, Middle Initial) MR ERICK MONCAYO			Date of Receipt
	Mailing Address 404 HAMILTON AVE			M M         /         D D         /         Y Y         Y Y         Y
		State NJ	Zip Code	Transaction ID: INCA100093
	GLEN ROCK FEC ID number of contributing		07452	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 · · · · · · · · · · · · · · · · · · ·	CLINICAL THERAPEUTICS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE			Date of Receipt
	Mailing Address 1320 BRONCO CIR			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100227
	WARRINGTON	PA	18976	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
Γ	SUBTOTAL of Receipts This Page (optional)			75.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 113 / 434         (check only one)       Image: Check only one)         X       11a       11b       11c       12         Image: Image
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	Medco Health PAC)	
A.	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY	Date of Receipt	
	Mailing Address 86 WELLINGTON AVE	0 6 0 4 Y Y Y Y 0 1 1	
	City	State Zip Code	Transaction ID: INCA100059
	SHORT HILLS	NJ 07078	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENL C-SEC-SVP PHARM STRAT SC	] 3L
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	2496.00	
- В.	Full Name (Last, First, Middle Initial) MS THERESA MORMILE		Date of Receipt
	Mailing Address 59 VALLEY VIEW TEF	1	0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100434
	MONTVALE	NJ 07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	650.00	
- С.	Full Name (Last, First, Middle Initial) MR CRAIG MORRIS		Date of Receipt
	Mailing Address N 49 W 25648 MCKEF	ROW DR	0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100261
		WI 53072	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR CLINICAL SVCS	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	650.00	
	SUBTOTAL of Receipts This Page (optional)	······	292.00
ŀ	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 114/434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) JACQUELINE MORRIS			Date of Receipt
	Mailing Address 750 COLUMBUS AVE APT 06S			M         M         /         D         D         /         Y
	City NEW YORK	State NY	Zip Code 10025	Transaction ID: INCA100621
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n L BUSINESS DEV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	
В.	Full Name (Last, First, Middle Initial) MR RICHARD MOUNTJOY Mailing Address 2 STONEBRIDGE RD			Date of Receipt
	City	State	Zip Code	0 6         0 4         2 0 1 1           Transaction ID:         INCA100477
	SPARTA	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 260.00	]
- C.	Full Name (Last, First, Middle Initial) MICHELE MUCCI			Date of Receipt
	Mailing Address 779 OLD MILL ROAD			M M / D D / Y Y Y Y 06 04 2011
		State	Zip Code	Transaction ID: INCA100646
	FRANKLIN LAKES FEC ID number of contributing federal political committee.	NJ C	07417	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
	SUBTOTAL of Receipts This Page (optional)			70.00
Ī	TOTAL This Period (last page this line number of	only)		

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 115 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
or fo	r commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	IAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
<b>4</b> . <u>N</u>	ull Name (Last, First, Middle Initial) /R PHILLIP MUELLER			Date of Receipt
N	Aailing Address 16329 RIVERBIRCH	0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1		
	Sity	State	Zip Code	Transaction ID: INCA100316
<u> </u>	MARYSVILLE	OH	43040	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		25.00
N N	lame of Employer IEDCO HEALTH SOLUTIONS	Occupatio DIR CLII	n NICAL SVCS	
F	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)	0 0	325.00	
	ull Name (Last, First, Middle Initial) IR ROBERT MULLER			Date of Receipt
_	Nailing Address 69 FERN PLACE			M M M         /         D D         /         Y Y Y Y Y         Y         Y Y Y Y         Y         Y         Y Y Y Y         Y         Y         Y         Y         Y Y Y         Y <t< td=""></t<>
		State	Zip Code	Transaction ID: INCA100450
_	PARAMUS	NJ	07652	Amount of Each Receipt this Period
fe	EC ID number of contributing ederal political committee.	C		50.00
_	lame of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n H BUS CLIENT ENROLLMN	г
F	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 650.00	]
	ull Name (Last, First, Middle Initial) IRS KATHLEEN MURPHY			Date of Receipt
N	Aailing Address 206 TARRYTOWN D	RIVE		0 6 0 4 Y Y Y Y 0 1 1
	Dity	State	Zip Code	Transaction ID: INCA100454
<u>F</u>	RICHMOND	VA	23229	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		25.00
_	lame of Employer IEDCO HEALTH SOLUTIONS	Occupation	n ACCT MGMT OPS	
F	Receipt For: Primary General Other (specify) ▼		e Year-to-Date V 325.00	]
SU	BTOTAL of Receipts This Page (optional)			100.00
	BTOTAL of Receipts This Page (optional)			100.

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 116 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17	
	Any information copied from such Reports and St or for commercial purposes, other than using the	name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)	
A.	Full Name (Last, First, Middle Initial) MS BECKY NAGLE			Date of Receipt	
	Mailing Address 64 WALTER AVE			0 6 0 4 2 0 1 1	
	City	State	Zip Code	Transaction ID: INCA100135	
	HASBROUCK HEIGHTS	NJ	07604	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINI	CAL SVCS		
	Receipt For:	Aggregate	Year-to-Date 🔻	_	
	Other (specify) ▼	0 0	650.00		
в.	Full Name (Last, First, Middle Initial) MR ANDREW NANICK			Date of Receipt	
	Mailing Address 220 LAUREL BAY DRI	VE		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1	
	City	State	Zip Code	Transaction ID: INCA100140	
	MURRELLS INLET	SC	29576	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS		LINICAL SVCS		
	Receipt For: Primary General	Aggregate	Year-to-Date V	-	
	Other (specify) ▼		325.00	]	
C.	Full Name (Last, First, Middle Initial) MS BARBARA NEAVERTH			Date of Receipt	
	Mailing Address PO BOX 523			M         M         /         D         D         /         Y	
	City	State	Zip Code	Transaction ID: INCA100112	
	SUGAR LOAF	NY	10981	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR B	USINESS REQUIREMENT	S	
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻	_	
	Other (specify) ▼	0 0	325.00		
	SUBTOTAL of Receipts This Page (optional)			100.00	
	TOTAL This Period (last page this line number of	only)	I		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 117 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۷ A.	Full Name (Last, First, Middle Initial) BRIAN NEMIROFF	Date of Receipt	
	Mailing Address 335 VILLAGE PLACE	0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100619
	WYCKOFF	NJ 07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ORG DEV	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	325.00	
- В.	Full Name (Last, First, Middle Initial) CHRISTIAN NICKERSON		Date of Receipt
	Mailing Address 20 MELVILLE ROAD		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100617
	PRINCETON JCT	NJ 08550	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ENTERPRISE BUS INTELLIG	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- C.	Full Name (Last, First, Middle Initial) MR MICHAEL NICODEMO		Date of Receipt
	Mailing Address 407 MEER AVE		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100482
	WYCKOFF	NJ 07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
ſ	SUBTOTAL of Receipts This Page (optional)		100.00
	TOTAL This Period (last page this line number of	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 118 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS ARLENE NOLAN	Date of Receipt		
	Mailing Address 319 BOGERT AVENUE	M         M         /         D         D         /         Y		
	City RIDGEWOOD	State NJ	Zip Code	Transaction ID: INCA100176
	FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	]
в.	Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN			Date of Receipt
	Mailing Address 45 DAVIS ROAD			0 6 0 4 Y Y Y Y Y Y Y
	City SPARTA	State NJ	Zip Code	Transaction ID: INCA100265
	FEC ID number of contributing federal political committee.	C	07871	Amount of Each Receipt this Period 38.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		NICAL THERAPEUTICS	_
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 494.00	]
C.	Full Name (Last, First, Middle Initial) MS JANINE NOWATZKY			Date of Receipt
	Mailing Address 24 CHEROKEE TRAIL			0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100333
	OAKLAND FEC ID number of contributing federal political committee.	NJ C	07436	Amount of Each Receipt this Period 30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n NG & PRODUCT DEV	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 390.00	]
	SUBTOTAL of Receipts This Page (optional)			118.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 119 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17				
	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)				
A.	Full Name (Last, First, Middle Initial) DENISE O'CALLAGHAN		Date of Receipt				
	Mailing Address 4 HIGHLAND AVE P.O. BOX 408		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1				
	City PEAPACK	State Zip Code NJ 07977	Transaction ID: INCA100612				
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	-				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00					
- B.	Full Name (Last, First, Middle Initial) MR ROBERT O'CONNELL Mailing Address 12001 PEONY CT		Date of Receipt				
	City	State Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100171				
		FL 33635	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR SECURITY	-				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00					
- C.	Full Name (Last, First, Middle Initial) SUSAN O'CONNOR		Date of Receipt				
	Mailing Address 5 HICKORY DRIVE		0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1				
	City	State Zip Code	Transaction ID: INCA100623				
	NANUET FEC ID number of contributing federal political committee.	NY 10954	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MEDICAL					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00					
ſ	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:     PAGE 120 / 434       (check only one)     I1a       X     11a       I1b     I1c       I2
ſ	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to s	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.
		POLITICAL ACTION COMMITTEE (a.k.a.	
A.	Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER		Date of Receipt
	Mailing Address 6 PARK DR SOUTH	0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100464
	RYE FEC ID number of contributing	NY 10580	Amount of Each Receipt this Period
	federal political committee.		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP COO	
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary     General       Other (specify) ▼	650.00	
- В.	Full Name (Last, First, Middle Initial) MR MELVIN OHL		Date of Receipt
	Mailing Address 274 E FRANKLIN TPK	E	0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100408
	RIDGEWOOD	NJ 07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROCUREMENT & INVENTORY	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	650.00	
- C.	Full Name (Last, First, Middle Initial) MR NEVIN OKAY	1	Date of Receipt
	Mailing Address 733 RIDGE RD		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100119
	KINNELON FEC ID number of contributing	NJ 07405	Amount of Each Receipt this Period
	federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TRC OPS PROD DEV	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	325.00	
ſ	SUBTOTAL of Receipts This Page (optional)	▶	125.00
	TOTAL This Period (last page this line number	only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 121 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
∠⁄ A.	Full Name (Last, First, Middle Initial) MR BRYAN OLENIK		Date of Receipt
	Mailing Address 22212 N. 36TH ST	06 / 04 / Y Y Y Y 011 / 04 / 2011	
	City	State Zip Code	Transaction ID: INCA100447
	PHOENIX FEC ID number of contributing federal political committee.	AZ 85050	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
— B.	Full Name (Last, First, Middle Initial) MRS SUE OLIVER Mailing Address 11 LEE DRIVE		Date of Receipt
		06 04 2011	
	City NORTH HALEDON	State Zip Code NJ 07508	Transaction ID: INCA100416
	FEC ID number of contributing federal political committee.	NJ 07508	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR TECHNOLOGY	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
 c.	Full Name (Last, First, Middle Initial) MS CLAUDINE OLSEN	I	Date of Receipt
	Mailing Address 4 HIGHGATE CT		0 6 0 4 Y Y Y Y 0 1 1
	City	State Zip Code	Transaction ID: INCA100457
	SUFFERN FEC ID number of contributing federal political committee.	NY 10901	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	87.50
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for e	separate schedule(s) ach category of the ailed Summary Page	FOR LINE NUMBER:       PAGE 122 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTIO	N COMMITTEE (a.k.a	. Medco Health PAC)
∠ A.	Full Name (Last, First, Middle Initial) MS PATRICE OLSON			Date of Receipt
	Mailing Address 9933 TOLEDO DRIVE	NORTH		06 / 04 / Y Y Y Y 011 / 04
	City		o Code	Transaction ID: INCA100473
	BROOKLYN PARK FEC ID number of contributing		5443	Amount of Each Receipt this Period
	federal political committee.			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT	MGMT	
	Receipt For:	Aggregate Year-to		_
	Primary     General       Other (specify)     ▼		325.00	]
- В.	Full Name (Last, First, Middle Initial) MS CYNTHIA O'NEILL			Date of Receipt
	Mailing Address 69 SUMMIT AVE			M M / D D / Y Y Y Y 06 04 2011
	City	State Zip	o Code	Transaction ID: INCA100394
	MONTVALE	NJ 07	7645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS & INS	TALLATION SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 650.00	]
– c.	Full Name (Last, First, Middle Initial) ALEXANDER ONIK			Date of Receipt
0.	Mailing Address 1 SCHINDLER CT			0 6 0 4 2 0 1 1
	City UPPER SADDLE RIVER	•	Code	Transaction ID: INCA100566
	FEC ID number of contributing federal political committee.	C	/458	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOL	OGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 325.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			100.00
F	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X)		wata a sha dula (s)	FOR LINE NUMBER: PAGE 123 / 434
	· · · ·		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements may not be sold name and address of any r	or used by any person political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P			Modee Health BAC)
	MEDGO HEALTH SOLUTIONS INC. F			Meddo Health FAG)
Α.	Full Name (Last, First, Middle Initial) MS NATALYA ONIK	Date of Receipt		
	Mailing Address 1 SCHINDLER CT	0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1		
	City	State Zip Cod	le	Transaction ID: INCA100301
	UPPER SADDLE RIVER	NJ 07458		Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BIAC SYSTEM		-
	Receipt For:			-1
	Primary General	Aggregate Year-to-Date		
	Other (specify) ▼		325.00	
_		0 0 0 0		
B.	Full Name (Last, First, Middle Initial) MR KIPP OTTLEY			Date of Receipt
	Mailing Address 672 PETWORTH CT			0 6 0 4 2 0 1 1
	City	State Zip Cod	0	Transaction ID: INCA100228
	POWELL	OH 43065		
		43065		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer	Occupation		-
	Name of Employer MEDCO HEALTH SOLUTIONS	DIR HLTH CARE O	PS	
	Receipt For:	Aggregate Year-to-Date		-
	Primary General		1 1 1 1 1	
	Other (specify)		325.00	
_				
C.	Full Name (Last, First, Middle Initial) MS DAWN PAGANO			Date of Receipt
0.	Mailing Address 185 PASCACK ROAD			
	Maining Address 165 PASCACK RUAD			06 04 2011
	City	State Zip Cod	le	Transaction ID: INCA100396
	PARK RIDGE	NJ 07656		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		1
		VP BIAC	_	4
	Receipt For:	Aggregate Year-to-Date	e ▼	
	Primary General		650.00	
	Other (specify)	0 0 0 0		
[	SUBTOTAL of Receipts This Page (optional)			100.00
ŀ	SUBICIAL OF RECEIPTS THIS Page (optional)		····· •	
	TOTAL This Period (last page this line number of	nly)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 124 / 434           (check only one)         (check 112           X         11a         11b         11c         12           13         14         15         16         17
	or for commercial purposes, other than using the	name and ad	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR RICHARD PAGANO			Date of Receipt
	Mailing Address 185 PASCACK RD			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100390
	PARK RIDGE	NJ	07656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n BUSINESS REQUIREMENT	s
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		325.00	1
	Other (specify)	0		
в.	Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE			Date of Receipt
0.	Mailing Address 12 MILLBROOK COUF	RT		M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100288
	LIVINGSTON	NJ	07039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP RETI	n IREE SOLUTIONS MKTG	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	650.00	
C.	Full Name (Last, First, Middle Initial) JULIE PAK			Date of Receipt
	Mailing Address 417 BRITTANY DRIVE			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100644
	WAYNE	NJ	07470	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	m ATEGIC MKT DEV	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)		••••••	100.00
	TOTAL This Period (last page this line number of	only)	▶	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 125 / 434           (check only one)         11a           X         11a           13         14           15         16
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR RICHARD PALOMBO			Date of Receipt
	Mailing Address 19 E. HOLLYWOOD L	ANE		0 6 / D D / Y Y Y Y 2 0 1 1
		State	Zip Code	Transaction ID: INCA100518
	BEESLEY'S POINT FEC ID number of contributing federal political committee.	NJ C	08223	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n PHARMACY REGULATORY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
- 3.	Full Name (Last, First, Middle Initial) MR JUN PARK Mailing Address 2843 HONEYSUCKLE			Date of Receipt
	- 	06 04 2011		
	City HILLIARD	State OH	Zip Code 43026	Transaction ID: INCA100555 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio BUSINES	n SS PROCESS CHAMPION	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
-	Full Name (Last, First, Middle Initial) MS GIRA PATEL			Date of Receipt
	Mailing Address 5 FOXHILL RUN			0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100282
	MONMOUTH JUNCTION	NJ	08852	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 1	BUSINESS REQUIREMENT	s
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			62.50
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 126 / 434
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR JAY PATEL			Date of Receipt
	Mailing Address 14 BROWNSTONE TER	RACE		06 04 YYYY 2011
	City	State	Zip Code	Transaction ID: INCA100549
	HAWTHORNE	NJ	07506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on CHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
_	Full Name (Last, First, Middle Initial)			
В.	MR JITENDRE PATEL Mailing Address 81 GLESS AVE			Date of Receipt
	Maining Address 81 GLESS AVE	0 6 0 4 Y Y Y Y 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100472
	BELLEVILLE	NJ	07109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	on CAL SPECIALIST	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	
C.	Full Name (Last, First, Middle Initial) MR MATTHEW PATELLA			Date of Receipt
	Mailing Address 30 TAM O SHANTER D	RIVE		M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100115
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	on L ACCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	650.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
			•	
	TOTAL This Period (last page this line number o	nly)		

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 127 / 434 (check only one)
	ITEMIZED RECEIPTS		for each category of the	$\overline{X}$ 11a 11b 11c 12
			Detailed Summary Page	
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	AMEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS			Date of Receipt
	Mailing Address 2780 FOLKSTONE RC	DAD		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100148
	COLUMBUS	OH	43220	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:		e Year-to-Date 🔻	1
	Primary General		650.00	1
-	Other (specify) <b>v</b>	0 0	030.00	
В.	Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI			Date of Receipt
υ.	Mailing Address 211 WILTSIE COURT			0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100244
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFC	on ) TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		390.00	]
C.	Full Name (Last, First, Middle Initial) MERRI PENDERGRASS, MD			Date of Receipt
-	Mailing Address 3201 QUEENSBURY V	VAY WEST	-	0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100631
	COLLEYVILLE	TX	76034	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP NAT	on IONAL PRACTICE LEADER	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		650.00	]
	SUBTOTAL of Receipts This Page (optional)		<b>•</b>	105.00
			······	
	TOTAL This Period (last page this line number of	only)		· · · · · · · · · · · · · · · · · · ·

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 128 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۷ A.	Full Name (Last, First, Middle Initial) MR VICTOR PERINI		Date of Receipt
	Mailing Address 9304 GROVE PARK C	OVE	0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100634
	GERMANTOWN	TN 38139	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP INFUSION OPS	
	Receipt For:	Aggregate Year-to-Date V	
	Primary     General       Other (specify) ▼	650.00	
- B.	Full Name (Last, First, Middle Initial) JIMMY PERREN		Date of Receipt
	Mailing Address 1250 BRAY PARK DR	06 / D D / Y Y Y Y 06 04 2011	
	City	State Zip Code	Transaction ID: INCA100663
	COLLIERVILLE	TN 38017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP REGULATORY COMPLIANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	
- C.	Full Name (Last, First, Middle Initial) MR NATHAN PETERSON	I	Date of Receipt
-	Mailing Address 1520 PEMBROKE PAS	SS	0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100257
	CHANHASSEN	MN 55317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
ſ	SUBTOTAL of Receipts This Page (optional)	••••••••••••••••••••••••••••••••••••••	150.00
ľ	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 129 / 434           (check only one)         11a           X         11a           11b         11c           12		
	Any information copied from such Reports and St or for commercial purposes, other than using the	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N				
Α.	Full Name (Last, First, Middle Initial) MR THOMAS PETTYES			Date of Receipt		
	Mailing Address 8522 UPLAND LN NOF	RTH		06 04 Y Y Y Y 06 01 04		
	City	State	Zip Code	Transaction ID: INCA100202		
	MAPLE GROVE FEC ID number of contributing federal political committee.	MN C	55311	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio				
	Receipt For:			_		
	Primary General Other (specify) ▼	Aggregati	e Year-to-Date 650.00			
B.	Full Name (Last, First, Middle Initial) MARTINE PFLIEGER			Date of Receipt		
	Mailing Address 44 HENRY TERRACE			0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100597		
	LINCOLN PARK	NJ	07035	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR ATT	ORNEY			
	Receipt For: Primary General Other (specify) ▼	Aggregati	e Year-to-Date 325.00			
С.	Full Name (Last, First, Middle Initial) MR LOUIS PICONE			Date of Receipt		
	Mailing Address 37 TAMARACK DRIVE			M M / D D / Y Y Y Y 06 04 2011		
	City	State	Zip Code	Transaction ID: INCA100514		
	SUCCASUNNA	NJ	07876	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	-	CHNOLOGY			
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date V 325.00			
	SUBTOTAL of Receipts This Page (optional)		•	100.00		
	TOTAL This Period (last page this line number of	only)				

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	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 130 / 434					
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)					
			Detailed Summary Page						
				13 14 15 16 17					
	Any information copied from such Reports and St or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any persor or for commercial purposes, other than using the name and address of any political committee to s							
	MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a k	a Medco Health PAC)					
			(a						
•	Full Name (Last, First, Middle Initial)								
Α.				Date of Receipt					
	Mailing Address 10297 E. LAKE DR.			0 6 0 4 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA100586					
	ENGLEWOOD	CO	80111	Amount of Each Receipt this Period					
	FEC ID number of contributing	•		50.00					
	federal political committee.	C		50.00					
	Name of Employer	Occupatio	าก	_					
	Name of Employer MEDCO HEALTH SOLUTIONS		OR RELATIONS						
	Receipt For:	Aggregat	e Year-to-Date 🔻						
	Primary General		650.00						
	Other (specify) 🔻	0 0							
	Full Norse (Lest First Middle Initial)								
В.	Full Name (Last, First, Middle Initial) DR PAGE PIGG			Date of Receipt					
	Mailing Address 9297 ANGLER TRL			M M / D D / Y Y Y Y					
				06 04 2011					
	City	State	Zip Code	Transaction ID: INCA100254					
	MECHANICSVILLE	VA	23116	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio							
		-	NICAL SVCS						
	Receipt For: Primary General	Aggregat	e Year-to-Date 🔻	_					
	Other (specify)		325.00						
		0 0							
	Full Name (Last, First, Middle Initial)								
C.				Date of Receipt					
	Mailing Address 29 BLACKWELL AVE			0 6 0 4 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA100072					
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	C		192.30					
	Name of Employer	Occupatio	าก	_					
	Name of Employer MEDCO HEALTH SOLUTIONS		GENERAL MGR						
	Receipt For:		e Year-to-Date 🔻						
	Primary General		2499.90						
	Other (specify) 🔻	0 0							
1									
	CURTOTAL of Descints This Dass (astists)			267.30					
	SUBTOTAL of Receipts This Page (optional)								
	<b>TOTAL</b> This Period (last page this line number of	only)							
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	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 131 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
∠ A.	Full Name (Last, First, Middle Initial) MR RICHARD PONESSE	Date of Receipt	
	Mailing Address 10 DISTILLERY PATH	0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100492
	NEWBURGH	NY 12550	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP PRICING	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	650.00	
- В.	Full Name (Last, First, Middle Initial) MS JANET PORAT		Date of Receipt
	Mailing Address 5 CRABAPPLE CT		06 / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100205
	MONSEY	NY 10952	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	325.00	
- c.	Full Name (Last, First, Middle Initial) MR NEIL PREZIOSO		Date of Receipt
	Mailing Address 10258 WINDSOR WA	ſ	0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100366
	POWELL	OH 43065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP TRC & HEALTHCARE OPS	_
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	650.00	
ſ	SUBTOTAL of Receipts This Page (optional)	······	125.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 132 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	Medco Health PAC)	
⊻ A.	Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE		Date of Receipt
	Mailing Address 875 ALEXANDRIA CT	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA100314
	RAMSEY	NJ 07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP HR	-
	Receipt For:	Aggregate Year-to-Date	
	Primary     General       Other (specify) ▼	2499.90	
- В.	Full Name (Last, First, Middle Initial) MR ROBERT PRITCHET		Date of Receipt
	Mailing Address 135 HOLLYBERRY DF	RIVE	M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100422
	HOPEWELL JUNCTION	NY 12533	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CONTRACT ADMINISTRATOR	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify)	325.00	
– c.	Full Name (Last, First, Middle Initial) BARBARA S. PROSSER		Date of Receipt
	Mailing Address 8A HEMLOCK ROAD		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100709
	COLUMBIA	NJ 07832	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL MGMT & SVCS	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) <b>v</b>	325.00	
	SUBTOTAL of Receipts This Page (optional)	•	242.30
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 133 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17			
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	on for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)						
۷ A.	Full Name (Last, First, Middle Initial) MR JASON PROULX	Date of Receipt					
	Mailing Address 3601 LEANNE DRIVE			0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100513			
	FLOWER MOUND	TX	75022	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP OPS	n PLANNING				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]			
- B.	Full Name (Last, First, Middle Initial) MR MARK PROULX			Date of Receipt			
		Aailing Address 20 BRANDY RIDGE ROAD					
	City State		Zip Code	Transaction ID: INCA100506			
	<u>SPARTA</u>	NJ	07871	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		192.31			
	Name of Employer MEDCO HEALTH SOLUTIONS		F OPERATIONS				
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 2500.03	]			
- c.	Full Name (Last, First, Middle Initial) MS CATHERINE PURDUE			Date of Receipt			
0.	Mailing Address 318 NEWBURY DRIVE			0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100449			
	MONROEVILLE	PA	15146	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.		C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	-!	SINESS DEV				
	Receipt For: Primary General Other (specify) <b>v</b>	Aggregate	e Year-to-Date ▼ 325.00	]			
ſ	SUBTOTAL of Receipts This Page (optional)			267.31			
	TOTAL This Period (last page this line number o	only)					

				t
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 134 / 434
	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
r				13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
	Full Name (Last, First, Middle Initial)			
Α.	SYED QUADRI			Date of Receipt
	Mailing Address 6040 KENNEDY BLVD APT 30N	EAST		M M         /         D D         /         Y
	City	State	Zip Code	Transaction ID: INCA100498
	WEST NEW YORK	NJ	07093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		_
	Receipt For:		e Year-to-Date V	
	Primary General			
	Other (specify)	0 0	325.00	
B.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
	Mailing Address 800 SANDY TRAIL			M M / D D / Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100530
	KELLER	ΤX	76248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General			
	Other (specify) <b>v</b>		650.00	1
С.	Full Name (Last, First, Middle Initial) KATHERINE RANDALL			Date of Receipt
0.	Mailing Address 8774 BRUNSWICK FAI	RMS DRIV	E	M M / D D / Y Y Y Y
				06 04 2011
	City	State	Zip Code	Transaction ID: INCA100645
	ARLINGTON	TN	38002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation	on	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General			
	Other (specify) 🔻	0 0	325.00	1
	SUBTOTAL of Receipts This Page (optional)			75.00
ŀ				
	TOTAL This Period (last page this line number of	nly)	I	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 135 / 434           (check only one)         Image: Constraint of the second sec				
	or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	Any information copied from such Reports and Statements may not be sold or used by any person f or for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
A.	Full Name (Last, First, Middle Initial) MS FRANCES RAO Mailing Address 19 ROSS ROAD		Date of Receipt				
	City	State Zip Code	Transaction ID: INCA100107				
	SCARSDALE						
	FEC ID number of contributing federal political committee.	C	75.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRIVACY					
	Receipt For:	Aggregate Year-to-Date  975.00					
в.	Full Name (Last, First, Middle Initial) MRS DOLORES RAPUANO		Date of Receipt				
	Mailing Address 57660 BEAVER VALLEY		0 6 / 0 4 / Y Y Y Y 0 1 1				
	City	State Zip Code	Transaction ID: INCA100469				
	QUAKER CITY FEC ID number of contributing federal political committee.	OH 43773	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ELIGIBILITY	-				
	Receipt For:	Aggregate Year-to-Date 🔻					
	Other (specify)	325.00					
C.	Full Name (Last, First, Middle Initial) MRS MONICA REED		Date of Receipt				
	Mailing Address 8475 DUNHAM STATIO	N DRIVE	0 6 / 0 4 / Y Y Y Y 0 1 1				
	City	State Zip Code	Transaction ID: INCA100309				
	TAMPA FEC ID number of contributing federal political committee.	FL 33647	Amount of Each Receipt this Period 50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROF PRA					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00					
	SUBTOTAL of Receipts This Page (optional)		150.00				
	TOTAL This Period (last page this line number on	ly)►					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate for each cate Detailed Sum	gory of the mary Page	FOR LINE NUMBER:       PAGE 136 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17	
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	solicit contributions from such committee.				
Α.	Full Name (Last, First, Middle Initial) MS MARGARET REICHENBACHER Mailing Address 26 UNDERWOOD DR	MS MARGARET REICHENBACHER				
	City	State	Zip Code		0 6 0 4 2 0 1 1 Transaction ID: INCA100330	
	WEST ORANGE	NJ	07052		Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1	25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	<b>↓ ↓</b>	IR TECHNOLO		_	
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date	325.00		
в.	Full Name (Last, First, Middle Initial) MRS HEATHER REIGLE Mailing Address 10816 BARBADOS ISI	LE DRIVE			Date of Receipt	
	City State Zip Code				06042011 Transaction ID: INCA100109	
	ТАМРА	FL	33647		Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		0 0	25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	<u> </u>	on CUST SVC e Year-to-Date ▼	325.00		
с.	Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS Mailing Address 204 TOKENEKE RD	I			Date of Receipt	
	City	State	Zip Code		Transaction ID: INCA100224	
	DARIEN	СТ	06820		Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С			50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	;			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date	650.00		
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 137 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M					
۷ A.	Full Name (Last, First, Middle Initial) MRS YVETTE RENNIE	Date of Receipt					
	Mailing Address 1 RED OAK LANE			0 6 / D D / Y Y Y Y 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100089			
	KINNELON FEC ID number of contributing federal political committee.	NJ C	07405	Amount of Each Receipt this Period 25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]			
- В.	Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS Mailing Address 412 RIVER MEWS LA	I NF		Date of Receipt			
			06 04 2011				
	City State EDGEWATER NJ		Zip Code 07020	Transaction ID: INCA100527 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		70.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS REQUIREMENTS				
	Receipt For: Primary General Other (specify) ▼	Aggregate	910.00	]			
- C.	Full Name (Last, First, Middle Initial) MS ANGELA RIECK			Date of Receipt			
	Mailing Address 5 EGBERT AVENUE			0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100636			
	MORRISTOWN FEC ID number of contributing federal political committee.	NJ C	07960	Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PER	n FORMANCE CONSULTING				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]			
ſ	SUBTOTAL of Receipts This Page (optional)			120.00			
	TOTAL This Period (last page this line number	only)					

I	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each Detailed	parate schedule(s) h category of the d Summary Page	FOR LINE NUMBER:       PAGE 138 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MRS JACQUELINE RIMSKY	Date of Receipt		
	Mailing Address 13 HILLCREST ROAD			M M / D D / Y Y Y Y 06 04 2011
	City	State Zip C		Transaction ID: INCA100575
	TOWACO	NJ 0708	2	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE		
	Receipt For:	Aggregate Year-to-D	ate 🔻	
	Primary     General       Other (specify) ▼		325.00	
в.	Full Name (Last, First, Middle Initial) MR WILLIAM RINCON			Date of Receipt
	Mailing Address 32 CLINTON VIEW TE	RRACE		M M / D D / Y Y Y Y 06 04 2011
	City State		ode	Transaction ID: INCA100358
	HEWITT	NJ 0742	1	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS R	EQUIREMENTS	
	Receipt For: Primary General	Aggregate Year-to-D	ate 🔻	
	Other (specify)		325.00	
C.	Full Name (Last, First, Middle Initial) ELIZABETH RITCHIE			Date of Receipt
	Mailing Address 27 DAY RD			M M / D D / Y Y Y Y 06 04 2011
	City	State Zip C		Transaction ID: INCA100591
	PLEASANT VALLEY	CT 0606	3	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MARKET		
	Receipt For:	Aggregate Year-to-D	ate 🔻	
	Other (specify) ▼		650.00	
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 139 / 434           (check only one)         11a           X         11a           11b         11c           13         14           15         16           17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F			
Α.	Full Name (Last, First, Middle Initial) MS VIRGINIA RIVAS			Date of Receipt
	Mailing Address 7845 E 5TH ST			0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100075
	DOWNEY     CA       FEC ID number of contributing federal political committee.     C		90241	Amount of Each Receipt this Period
				25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		_
	Receipt For:	Aggregate	Year-to-Date V	
	Primary     General       Other (specify) ▼	]		
В.	Full Name (Last, First, Middle Initial) MR DAVID ROBARGE			Date of Receipt
	Mailing Address 4565 QUEENSLAND L	N N		M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100153
	MINNEAPOLIS	MN	55446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	DELINICAL SVCS	
		Aggregate	Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	325.00	]
С.	Full Name (Last, First, Middle Initial) MRS JENNIFER ROBERTS	l		Date of Receipt
	Mailing Address 1342 DALTON CT			M + M         /         D + D         /         Y + Y + Y         Y           0 6         0 4         2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100193
	FAIRFIELD	OH	45014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS	i	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary     General       Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)			62.50
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 140 / 434           (check only one)		
ſ	Any information copied from such Reports and Stor for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions				
	NAME OF COMMITTEE (In Full)					
⊻ A.	Full Name (Last, First, Middle Initial) ERIC ROELOFS	Date of Receipt				
	Mailing Address 9 STRATFORD WAY			M M / D D / Y Y Y Y 06 04 2011		
	City	State	Zip Code	Transaction ID: INCA100628		
	MORRIS PLAINS	NJ 07950		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n CHNOLOGY			
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼	0 0	325.00			
- В.	Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO			Date of Receipt		
	Mailing Address 855 CLUB MOSS CT.			M = M         /         D = D         /         Y = Y = Y         Y           0 6         0 4         2 0 1 1		
	City State		Zip Code	Transaction ID: INCA100222		
	MARIETTA FEC ID number of contributing	GA	30068	Amount of Each Receipt this Period		
	federal political committee.	C		192.30		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio PRESID	n ENT SYSTEMED			
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	1		
	Other (specify)		2499.90			
- C.	Full Name (Last, First, Middle Initial) DAVID ROOT			Date of Receipt		
	Mailing Address 212 SPRING BRANCH	ROAD		0 6 / D D / Y Y Y Y Y 0 6 / 0 4 2 0 1 1		
		State	Zip Code	Transaction ID: INCA100605		
	WAVERLY FEC ID number of contributing federal political committee.	C	23890	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio				
	Receipt For:	-	TE GOVERNMENT AFFAIR	S		
	Primary General Other (specify) ▼		325.00	]		
Γ				242.30		
╞	SUBTOTAL of Receipts This Page (optional)					
	TOTAL This Period (last page this line number of	only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 141 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	a. Medco Health PAC)				
۷ A.	Full Name (Last, First, Middle Initial) MS DONNA ROSEN	MS DONNA ROSEN				
	Mailing Address 7 RED OAK LANE			0 6 / 0 4 / Y Y Y Y 0 1 1		
		State	Zip Code	Transaction ID: INCA100423		
	KINNELON	NJ	07405	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Receipt For: Aggregate		on -CLINICAL TECH			
			e Year-to-Date 🔻	_		
	Other (specify) ▼		650.00			
- В.	Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS			Date of Receipt		
	Mailing Address 7227 RAMOTH DRIVE			M         M         /         D         D         Y		
	City State		Zip Code	Transaction ID: INCA100179		
	JACKSONVILLE	<u>FL</u>	32226	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC D	on IR FORMULARY CONSULT	ING		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_		
	Other (specify)	0 0	650.00			
- C.	Full Name (Last, First, Middle Initial) MS LAUREN RUBENSTEIN			Date of Receipt		
	Mailing Address 345 WINTHROP DRIV	E		M         M         /         D         D         Y		
		State	Zip Code	Transaction ID: INCA100466		
		NJ	07110	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	on CHNOLOGY			
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_		
	Other (specify)		325.00			
ſ	SUBTOTAL of Receipts This Page (optional)			125.00		
ŀ	TOTAL This Period (last page this line number					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 142 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	Medco Health PAC)	
۷ A.	Full Name (Last, First, Middle Initial) MR RICHARD RUBINO	Date of Receipt	
	Mailing Address 3 APACHE DRIVE		06 / 04 / Y Y Y Y 011 0
		State Zip Code	Transaction ID: INCA100420
	OAKLAND FEC ID number of contributing	NJ 07436	Amount of Each Receipt this Period
	federal political committee.		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCE & CHIEF FIN OFFCR	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	2509.00	
- В.	Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK	I	Date of Receipt
	Mailing Address 13910 MCTYRES CO	VE LANE	0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100246
	MIDLOTHIAN	VA 23112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLINICAL MGMT & SVCS	
	Receipt For: Primary General	Aggregate Year-to-Date	
	Primary     General       Other (specify) ▼	650.00	
- C.	Full Name (Last, First, Middle Initial) MS KAREN RUSSELL	I	Date of Receipt
	Mailing Address 148 CLUBHOUSE DR		0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100101
	WEST COLUMBIA FEC ID number of contributing	SC 29172	Amount of Each Receipt this Period
	federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL SVCS	
	Receipt For: Primary General	Aggregate Year-to-Date V	
	Other (specify)	325.00	
ſ	SUBTOTAL of Receipts This Page (optional)	۱ ۱	268.00
F	TOTAL This Period (last page this line number		

				FOR LINE NUMBER: PAGE 143 / 434
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Odifiniary Page	13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MS KATHERYN RUSSI			Date of Receipt
	Mailing Address 5965 VILLAGE CIRCLE	Ξ		0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100122
	JOHNSTON	IA	50131	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n IR CLINICAL SVCS	
	Receipt For:	-	e Year-to-Date V	_
	Primary General	, iggi egai	650.00	1
	Other (specify) <b>▼</b>			
в.	Full Name (Last, First, Middle Initial) MR ANTHONY RUSSO			Date of Receipt
	Mailing Address 66 FINCH RD			M · M         /         D · D         Y         Y · Y · Y         Y           06         04         2011         1
	City	State	Zip Code	Transaction ID: INCA100372
	RINGWOOD	NJ	07456	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		650.00	]
с.	Full Name (Last, First, Middle Initial) MS JENNIFER RUSSO			Date of Receipt
0.	Mailing Address 35 DEAN ST.			0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100546
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	m MARKETING	
	Receipt For:		e Year-to-Date 🔻	
	Other (specify) ▼	U U U	325.00	]
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Statements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $144/434$ (check only one)X11a11b1314151617on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	o solicit contributions from such committee.		
Α.	Full Name (Last, First, Middle Initial) MR JESSE RUZICKA Mailing Address 334 MORRIS AVE			Date of Receipt
	01	01-1-1	7. 0. 1.	06 04 2011
	City BOONTON	State NJ	Zip Code 07005	Transaction ID: INCA100547 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACC		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 390.00	]
В.	Full Name (Last, First, Middle Initial) MS MARY RYAN			Date of Receipt
	Mailing Address 456 RICHMOND AVEN	NUE		0 6 0 4 Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100414
	MAPLEWOOD	NJ	07040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.34
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	1 1		
	Primary General Other (specify) ▼		Year-to-Date ▼ 1018.42	]
C.	Full Name (Last, First, Middle Initial) MRS CYNTHEA RYDER			Date of Receipt
	Mailing Address 74 CHOCTAW TRAIL			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100088
	RINGWOOD	NJ	07456	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 1	M STRAT & DELIV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)		······	133.34
	TOTAL This Period (last page this line number	only)	I	
	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 145 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
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	Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MISS CYNTHIA RYLANDS			Date of Receipt
	Mailing Address 4836 MIDDLE RD			0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100448
	ALLISON PARK	PA	15101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR BUS	on BINESS REQUIREMENTS	_
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	325.00	]
В.	Full Name (Last, First, Middle Initial) ANTOINE SAAD			Date of Receipt
	Mailing Address 22 FRANKLIN DR			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100570
	MAHOPAC	NY	10541	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n CHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
C.	Full Name (Last, First, Middle Initial) MRS SARA SABIN			Date of Receipt
	Mailing Address 133 MOUNTAIN ROAD	)		0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100280
	CORNWALL-ON-HUDSON	NY	12520	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CCT EXEC	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0.0	325.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number c	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 146 / 434         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       17					
	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)					
۷ A.	Full Name (Last, First, Middle Initial) MR RYAN SADLER		Date of Receipt					
	Mailing Address 247 8TH ST. NE APT 202		M · M         /         D · D         /         Y					
	City	State Zip Code	Transaction ID: INCA100614					
	WASHINGTON	DC 20002	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	25.00					
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR GOVERNMENT AFFAIRS						
	Receipt For:	Aggregate Year-to-Date						
	Primary     General       Other (specify)	325.00						
- В.	Full Name (Last, First, Middle Initial) CHRISTOPHER SANDERS		Date of Receipt					
	Mailing Address 7475 MINK HOLLOW	ROAD	0 6 0 4 Y Y Y Y 0 1 1					
	City	State Zip Code	Transaction ID: INCA100627					
	HIGHLAND	MD 20777	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.		25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CAOR						
	Receipt For:	Aggregate Year-to-Date 🔻						
	Primary     General       Other (specify)     Image: Constraint of the second	325.00						
– c.	Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE		Date of Receipt					
	Mailing Address 7 AHERN WAY		M · M         /         D · D         Y         Y · Y         <					
	City	State Zip Code	Transaction ID: INCA100283					
	WEST ORANGE	NJ 07052	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.		25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ENTERPRISE BUS INTELLIG						
	Receipt For:	Aggregate Year-to-Date ▼						
	Other (specify)	325.00						
Γ	SUBTOTAL of Receipts This Page (optional)	L	75.00					
	TOTAL This Period (last page this line number	<b>·</b>						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule( for each category of the Detailed Summary Page	$\begin{array}{c c} X & 11a \\ \hline X & 11a \\ \hline 13 \\ \hline 14 \\ \hline 15 \\ \hline 16 \\ \hline 17 \\ \hline \end{array}$
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any e name and address of any political commi	/ person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMITTEE	(a.k.a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address 230 FAIRFIELD AVE.		M M         /         D D         /         Y
	City	State Zip Code	Transaction ID: INCA100157
	RIDGEWOOD FEC ID number of contributing federal political committee.	NJ 07450	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date V 650.0	0
B.	Full Name (Last, First, Middle Initial) MS BETH SAVARE Mailing Address 27 JONES LN		Date of Receipt
			06 04 2011
	City BLAIRSTOWN	State Zip Code NJ 07825	Transaction ID: INCA100417
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARM OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.0	0
C.	Full Name (Last, First, Middle Initial) MR MITCHELL SCHERF		Date of Receipt
	Mailing Address 739 CAMBERWELL D	R	0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100243
	EAGAN FEC ID number of contributing federal political committee.	MN 55123	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 325.0	0
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 148 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements may name and add	⊥ y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC		ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR DAVID SCHLETT			Date of Receipt
	Mailing Address 339 GRAMERCY PL			M         /         D         D         /         Y
		State	Zip Code	Transaction ID: INCA100419
	GLEN ROCK FEC ID number of contributing federal political committee.	NJ C	07452	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		
	Receipt For:	-	ANCIAL & ANALYTICAL SV	
	Primary General Other (specify) ▼		650.00	]
в.	Full Name (Last, First, Middle Initial) MR DENNIS SCHONBACHLER			Date of Receipt
	Mailing Address 35 ARAPAHO TRAIL			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100602
	BRANCHBURG FEC ID number of contributing federal political committee.	NJ C	08876	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n NT'L MARKETS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	1
	Other (specify)	0 0	325.00	
C.	Full Name (Last, First, Middle Initial) ERIC SCHUPP			Date of Receipt
	Mailing Address 340 S. MAIN			M         M         /         D         D         /         Y
	City MEMPHIS	State TN	Zip Code	Transaction ID: INCA100616
	FEC ID number of contributing federal political committee.	C	38103	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRC	n DDUCT LINE II	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 149 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and address of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ		Date of Receipt
	Mailing Address 9111 N KARLOV		M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA100149
	SKOKIE	IL 60076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL PROD CONSULT	-
	Receipt For:	Aggregate Year-to-Date	
	Primary     General       Other (specify)     ▼	350.00	
- В.	Full Name (Last, First, Middle Initial) BRUCE SCOTT		Date of Receipt
	Mailing Address 18650 BEARPATH TR	AIL	M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA100630
	EDEN PRAIRIE	MN 55347	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.31
	Name of Employer ACCREDO HEALTH GROUP	Occupation PRESIDENT	
	Receipt For:	Aggregate Year-to-Date V	
	Primary     General       Other (specify) ▼	2500.03	
- c.	Full Name (Last, First, Middle Initial) MS CYNTHIA SCOTT		Date of Receipt
	Mailing Address 18650 BEARPATH TR	AIL	M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100076
	EDEN PRAIRIE	MN 55437	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL PROG DEV	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	650.00	
ſ	SUBTOTAL of Receipts This Page (optional)	······	267.31
ľ	TOTAL This Period (last page this line number	only)	

				FOR LINE NUMBER: PAGE 150 / 434
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
l		-1		13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	ly not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT			Date of Receipt
	Mailing Address 7330 EVEREST LANE	- NORTH		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100468
	MAPLE GROVE	MN	55311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	pn	
		VP/GM		
	Receipt For: Primary General	Aggregate	e Year-to-Date V	-
	Other (specify)	0 0	650.00	
в.	Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE			Date of Receipt
	Mailing Address 3021 E MILLCREEK R	DAD		0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100067
	SALT LAKE CITY	UT	84109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR CLINICAL SVCS	
	Receipt For:		e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		650.00	
	Full Name (Last, First, Middle Initial)			
C.	MR ROBERT SENDEWICZ Mailing Address 1220 CROSSING WAY	,		Date of Receipt
				0 6 / D 0 / Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100111
	WAYNE	NJ	07470	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		325.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 151 / 434
		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	atements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV	Date of Receipt	
	Mailing Address 66 PROSPECT AVE		M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA100495
	WESTWOOD	NJ 07675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS DEV	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) <b>▼</b>	650.00	
в.	Full Name (Last, First, Middle Initial) MRS PATRICIA SGARELLA		Date of Receipt
	Mailing Address 275 MAIN STREET		M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         0 4         2 0 1 1         1
	City	State Zip Code	Transaction ID: INCA100502
	GLEN ROCK	NJ 07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRICING	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify)	325.00	
С.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III		Date of Receipt
	Mailing Address 1767 FAIRMOUNT ST	REET	M + M         /         D - D         /         Y - Y - Y         Y           06         04         2011         1
	City	State Zip Code	Transaction ID: INCA100343
	CARMEL	IN 46032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ONCOLOGY TRC OPS	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	780.00	]
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 152 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ROBERT SHANNON			Date of Receipt
	Mailing Address 59 DANNER AVE			0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100424
	HARRISON	NY	10528	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FIN		
	Receipt For:	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	325.00	]
в.	Full Name (Last, First, Middle Initial) WILLIAM SHANNON			Date of Receipt
	Mailing Address 711 BIRCHWOOD DR	IVE		0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100651
	WESTBURY	NY	11590	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & C	n HIEF PROCURE OFFICER	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	1728.00	
C.	Full Name (Last, First, Middle Initial) MR VALEY SHARGORODSKY	I		Date of Receipt
	Mailing Address 447 OGDEN AVE			0 6 0 4 Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100092
	TEANECK	NJ	07666	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	r •	CAL SPECIALIST	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		325.00	]
	SUBTOTAL of Receipts This Page (optional)			242.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 153 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR JOHN SHEA			Date of Receipt
	Mailing Address 62 FRANKLIN TURNP	IKE		0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1
		State	Zip Code	Transaction ID: INCA100086
	ALLENDALE FEC ID number of contributing federal political committee.	NJ C	07401	Amount of Each Receipt this Period 40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST C	on OUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 520.00	]
- B.	Full Name (Last, First, Middle Initial) MR FRANK SHEEHY Mailing Address 550 KNOLLWOOD RC	DAD		Date of Receipt
	City	State	Zip Code	
	RIDGEWOOD	NJ	07450	Transaction ID: INCA100168 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1	PRES SPEC PHARM SEGN	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date 2496.00	]
- C.	Full Name (Last, First, Middle Initial) <u>DAWN SHERMAN</u> Mailing Address 63 BRAMSHILL DRIVE	=		Date of Receipt
				06 04 2011
	City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INCA100598 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP INT	n L/COO JV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
	SUBTOTAL of Receipts This Page (optional)			282.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 154 / 434           (check only one)         11a           X         11a           13         14           15         16           17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 139 GATES AVENUE			0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City MONTCLAIR	State NJ	Zip Code 07042	Transaction ID: INCA100060 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ENERAL COUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
B.	Full Name (Last, First, Middle Initial) WENDELL SHERRELL Mailing Address PO BOX 748			Date of Receipt
				06 04 2011
	City COLLIERVILLE	State TN	Zip Code 38027	Transaction ID: INCA100626 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer ACCREDO HEALTH GROUP		DO CORP HR & TALENT N	идт
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 390.00	]
C.	Full Name (Last, First, Middle Initial) MR MARK SHINKLE			Date of Receipt
	Mailing Address 4464 REPASS DRIVE			M M / D D / Y Y Y Y 06 04 2011
		State	Zip Code	Transaction ID: INCA100181
	WESTFIELD FEC ID number of contributing federal political committee.	IN C	46074	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n SINESS PLANNING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			92.50
	TOTAL This Period (last page this line number c	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:     PAGE 155 / 434       (check only one)     X       X     11a       11b     11c       12
	Any information copied from such Reports and Si or for commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JAMES SHIVAS		Date of Receipt
	Mailing Address 18 PROSPECT AVE		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100274
	NORTH ARLINGTON	NJ 07031	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRICING	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	325.00	
в.	Full Name (Last, First, Middle Initial) MR ELWOOD SIDES III		Date of Receipt
	Mailing Address 150 CLAREMONT AVE		M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA100183
		CA 90803	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES	_
	Receipt For: Primary General	Aggregate Year-to-Date	
	Other (specify) ▼	325.00	
C.	Full Name (Last, First, Middle Initial) MS JODI SILBERMANN		Date of Receipt
	Mailing Address 16 TULIP LANE		M M / D D / Y Y Y Y 06 04 2011
		State Zip Code	Transaction ID: INCA100435
		NJ 07869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	
	Receipt For:	Aggregate Year-to-Date	
	Other (specify) ▼	325.00	
	SUBTOTAL of Receipts This Page (optional)		75.00
	TOTAL This Period (last page this line number of	only)	

		for each category of the	(check only one)
Any info	rmation copied from such Reports and Sta	Detailed Summary Page tements may not be sold or used by any persor ame and address of any political committee to	13 14 15 16 1
	E OF COMMITTEE (In Full)	DLITICAL ACTION COMMITTEE (a.k.a.	
	Name (Last, First, Middle Initial) REY SIMEK		Date of Receipt
Mailir	ng Address 3555 GRANDE TUSCA	NY WAY	M M / D D / Y Y Y Y 06 04 2011
City		State Zip Code	Transaction ID: INCA100305
FEC	V SMYRNA BEACH ID number of contributing al political committee.	FL 32168	Amount of Each Receipt this Period 50.00
	e of Employer CO HEALTH SOLUTIONS	Occupation VP CORP COMMUNICATIONS	_
Rece	ipt For: Primary General Other (specify) <b>▼</b>	Aggregate Year-to-Date ▼ 650.00	
. MR L	Name (Last, First, Middle Initial) EE SIMON ng Address 2390 GREENVIEW RO/		Date of Receipt
			06 04 2011
City NOF	RTHBROOK	State Zip Code	Transaction ID: INCA100478 Amount of Each Receipt this Period
FEC	ID number of contributing al political committee.		50.00
Nam MED	e of Employer CO HEALTH SOLUTIONS	Occupation VP/GM	
Rece	pipt For: Primary General Other (specify) <b>▼</b>	Aggregate Year-to-Date ▼ 650.00	
MR J	l Name (Last, First, Middle Initial) EFFREY SINKO ng Address 10 CHERRY TREE LAN	F	Date of Receipt
			06 04 2011
City <u>KIN</u> I	NELON	State Zip Code NJ 07405	Transaction ID: INCA100353 Amount of Each Receipt this Period
FEC	ID number of contributing al political committee.		50.00
Nam MÉD	e of Employer CO HEALTH SOLUTIONS	Occupation ASST GENERAL COUNSEL	
Rece	ipt For: Primary General Other (specify) <b>▼</b>	Aggregate Year-to-Date ▼ 650.00	
SUBTO	TAL of Receipts This Page (optional)	······ •	150.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 157 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۷ A.	, Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO	Date of Receipt	
	Mailing Address 564 DALE COURT EA	0 6 0 4 Y Y Y Y 0 0 1 1	
	City	State Zip Code	Transaction ID: INCA100110
	RIVER VALE	NJ 07675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR TECHNOLOGY	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	390.00	
- В.	Full Name (Last, First, Middle Initial) MR JOHN SISTO		Date of Receipt
	Mailing Address 24 MAYBERRY LANE	0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100407
	MECHANICSBURG	PA 17050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARMACY REGULATORY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- C.	Full Name (Last, First, Middle Initial) MR DAVID SITVER		Date of Receipt
	Mailing Address 24 YORKSHIRE AVE		0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100273
	SUFFERN	NY 10901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
ſ	SUBTOTAL of Receipts This Page (optional)		105.00
ľ	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 158 / 434         (check only one)				
	Any information copied from such Reports and Stat or for commercial purposes, other than using the na	ements may not be sold or used by any persor ame and address of any political committee to s	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
Α.	Full Name (Last, First, Middle Initial) ARUNBABU SIVAGAMINATHAN		Date of Receipt				
	Mailing Address 11 LINDA CT		0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1				
		State Zip Code	Transaction ID: INCA100576				
	LINCOLN PARK FEC ID number of contributing federal political committee.	NJ 07035	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST					
	Receipt For:	Aggregate Year-to-Date ▼ 325.00					
	Other (specify)						
В.	Full Name (Last, First, Middle Initial) MR BRADLEY SKATTER		Date of Receipt				
	Mailing Address 6433 FRANKLIN HILLS	RD	M M / D D / Y Y Y Y 06 04 2011				
	City	State Zip Code	Transaction ID: INCA100091				
	INDEPENDENCE FEC ID number of contributing federal political committee.	MN 55359	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR CLINICAL SVCS					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00					
C.	Full Name (Last, First, Middle Initial) MR EDWARD SKRIPATA		Date of Receipt				
0.	Mailing Address 70 RIVER ROAD UNIT D9		0 6 0 4 2 0 1 1				
	City	State Zip Code	Transaction ID: INCA100387				
	<u>CLIFTON</u> FEC ID number of contributing federal political committee.	NJ 07014	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00					
	SUBTOTAL of Receipts This Page (optional)		100.00				
	TOTAL This Period (last page this line number on	ly) ►					

Γ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Statomonto ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 159 / 434           (check only one)	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	o solicit contributions from such committee.			
∠ A.	Full Name (Last, First, Middle Initial) ANN SMITH Mailing Address 437 GLENDALE RD	Date of Receipt			
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100281	
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n PUBLIC AFFAIRS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	]	
— В.	Full Name (Last, First, Middle Initial) MR ROBERT SMITH Mailing Address 40 JOSHUA DR T			Date of Receipt	
				06 04 2011	
	City Sta RAMSEY NJ		Zip Code	Transaction ID: INCA100443	
	RAMSEY FEC ID number of contributing federal political committee.	C	07446	Amount of Each Receipt this Period	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP OPS	n	-	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]	
 C.	Full Name (Last, First, Middle Initial) MR ERIC SMITHER			Date of Receipt	
	Mailing Address 1132 NORTH ST RT	123		M         M         /         D         D         Y	
	City	State	Zip Code	Transaction ID: INCA100200	
	LEBANON FEC ID number of contributing federal political committee.	ОН	45036	Amount of Each Receipt this Period 12.50	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR OPS			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]	
	SUBTOTAL of Receipts This Page (optional)			112.50	
	TOTAL This Period (last page this line number	r only)		-	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER:         PAGE 160 / 434           (check only one)	
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P				
۷ A.	Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR			Date of Receipt	
	Mailing Address 23 CEDAR GATE ROA	M M / D D / Y Y Y Y 06 04 2011			
	City		p Code	Transaction ID: INCA100515	
	DARIEN FEC ID number of contributing federal political committee.	CT 0	6820	Amount of Each Receipt this Period 192.31	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHAIRMAN &	CEO		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date <b>V</b> 2500.03	]	
- В.	Full Name (Last, First, Middle Initial) MR ALAN SOKALER Mailing Address 30 MICHELLE WAY			Date of Receipt	
				06 04 2011	
	City PINE BROOK		Zip Code Transaction ID: INCA100548 07058 Amount of Each Receipt this Perio		
	FEC ID number of contributing federal political committee.	C		50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 650.00	]	
– C.	Full Name (Last, First, Middle Initial) MS MICHELE ST CLAIR			Date of Receipt	
	Mailing Address 7 EVERGREEN DRIVE UNIT 47	1		M         M         /         D         D         /         Y	
	City <u>CLIFTON</u>		p Code 7014	Transaction ID: INCA100486	
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FORMULA	ARY & COVERAGE M	— GMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 325.00	]	
ſ	SUBTOTAL of Receipts This Page (optional)			267.31	
	TOTAL This Period (last page this line number of	only)			

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 161 / 434 (check only one)			
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a $11b$ 11c $12$			
			Detailed Summary Fage	13 14 15 16 17			
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.					
ľ	NAME OF COMMITTEE (In Full)						
	> MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)			
A.	Full Name (Last, First, Middle Initial) BRENDA STAFFORD						
	Mailing Address 647 BERKELEY AVEN	UE		M M / D D / Y Y Y Y 06 / 04 / 2011			
	City	State	Zip Code	Transaction ID: INCA100632			
	ORANGE	NJ	07050	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	on OUNSEL				
	Receipt For:		e Year-to-Date V	_			
	Primary General	7.99.094		1			
_	Other (specify) <b>v</b>	0 0	325.00				
В.	Full Name (Last, First, Middle Initial) MR RALPH STAIANO			Date of Receipt			
	Mailing Address 1 LAMBROS DRIVE			M M / D D / Y Y Y Y 06 04 2011			
	City	State	Zip Code	Transaction ID: INCA100077			
	MONROE	NY	10950	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n BUSINESS REQUIREMENT	s			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	0 0	325.00	]			
- C	Full Name (Last, First, Middle Initial) PETER STARK			Date of Receipt			
C.	Mailing Address 4840 COLE ROAD			M M / D D / Y Y Y Y			
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100688			
	MEMPHIS	TN	38117	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer ACCREDO HEALTH GROUP	Occupatio CHIEF F	n INANCIAL OFFICER				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	0 0	650.00	]			
	SUBTOTAL of Receipts This Page (optional)		<b>_</b>	100.00			
	TOTAL This Period (last page this line number of	oniy)	P				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Sta	Use separate schedule for each category of the Detailed Summary Pag	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
	or for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ittee to solicit contributions from such committee.	
	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL ACTION COMMITTEE	(a.k.a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN Mailing Address 7 FOREST LAKE DR	Date of Receipt	
	City	State Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100421
	WEST HARRISON	NY 10604	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCIAL & ANALYTIC	AL SVC
	Receipt For: Primary General	Aggregate Year-to-Date V	
	Other (specify) ▼	2500.0	03
В.	Full Name (Last, First, Middle Initial) CHANNING STAVE		Date of Receipt
	Mailing Address 77 HIGHVIEW AVE		M M / D D / Y Y Y Y 06 04 2011
	City	State Zip Code	Transaction ID: INCA100603
	TUCKAHOE FEC ID number of contributing	NY 10707	Amount of Each Receipt this Period
	federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MARKETING	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	325.0	00
C.	Full Name (Last, First, Middle Initial) MS JILL STEARNS		Date of Receipt
	Mailing Address 13130 HALSELL DR		M M / D D / Y Y Y Y 06 04 2011
	City AUSTIN	StateZip CodeTX78732	Transaction ID: INCA100481
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.0	00
	SUBTOTAL of Receipts This Page (optional)		267.31
	TOTAL This Period (last page this line number or	ıly)	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 163 / 434
	<b>TEMIZED RECEIPTS</b>		for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
A	ny information copied from such Reports and St r for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR CRAIG STEEL			Date of Receipt
	Mailing Address 122 DEMAREST AVEN	M M / D D / Y Y Y Y 06 04 2011		
	City	State	Zip Code	Transaction ID: INCA100210
	EMERSON	NJ	07630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n _ ACCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	650.00	]
— В.	Full Name (Last, First, Middle Initial) MR JOHN STEIBLE			Date of Receipt
	Mailing Address 44 BIRCHWOOD LAN	0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100565
	BOONTON TOWNSHIP	NJ	07005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CCT EXEC	
	Receipt For:	Aggregate	Year-to-Date V	-
	Other (specify) ▼	0 0	325.00	]
— C.	Full Name (Last, First, Middle Initial) MS AMY STEINKELLNER			Date of Receipt
0.	Mailing Address 728 GULF BOULEVAR C/O PO BOX 834	D		0 6 0 4 2 0 1 1
	City INDIAN ROCKS BEACH	State FL	Zip Code 33785	Transaction ID: INCA100263 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ONAL PRACTICE LEADER	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		650.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number of			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 164 / 434         (check only one)       111         X       11a       11b       11c       12         13       14       15       16       17			
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may name and addr	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
A.	Full Name (Last, First, Middle Initial) MS LEAH STERMAN-KABRT			Date of Receipt			
	Mailing Address 24 OAK PL			0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100278			
	NORTH CALDWELL	NJ	07006	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	AL SPECIALIST				
	Receipt For: Primary General	Aggregate `	Year-to-Date 🔻	_			
	Other (specify) ▼	0 0	325.00				
В.	Full Name (Last, First, Middle Initial) DR GLEN STETTIN			Date of Receipt			
	Mailing Address 8 MILL GLEN CT			M         M         /         D         D         Y			
		State	Zip Code	Transaction ID: INCA100499			
		NJ	07458	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		192.31			
	Name of Employer MEDCO HEALTH SOLUTIONS	1 · · · · · · · · · · · · · · · · · · ·	EDICAL OFFICER				
	Receipt For: Primary General Other (specify) $\blacksquare$		Year-to-Date ▼ 2500.03	]			
с.	Full Name (Last, First, Middle Initial) MR GERARD STOCKER, JR			Date of Receipt			
	Mailing Address 80 ALGONQUIN TRL			M         M         /         D         D         Y			
		State	Zip Code	Transaction ID: INCA100211			
	OAKLAND FEC ID number of contributing federal political committee.	NJ C	07436	Amount of Each Receipt this Period 50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	ACCT EXEC				
	Receipt For:	1 4	Year-to-Date 🔻	1			
	Other (specify) 🔻	0 0	650.00	1			
	SUBTOTAL of Receipts This Page (optional)			267.31			
	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	tomonto moi	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 165 / 434           (check only one)			
	or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M					
A.	Full Name (Last, First, Middle Initial) MS JANNA STOUL Mailing Address 4 APACHE WAY			Date of Receipt			
	City	State	Zip Code	Transaction ID: INCA100096			
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R TECHNOLOGY				
	Receipt For:	Aggregate	Year-to-Date 🔻	_			
	Other (specify) ▼	0 0	325.00	]			
В.	Full Name (Last, First, Middle Initial) MS SUZANNE STREDNAK			Date of Receipt			
	Mailing Address 157 WATCHUNG DR			0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100154			
	HAWTHORNE	NJ	07506	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	1	CLINICAL SVCS				
	Receipt For: Primary General	Aggregate	Year-to-Date	-			
	Other (specify)	0 0	650.00				
C.	Full Name (Last, First, Middle Initial) MS PATRICIA STRETE			Date of Receipt			
	Mailing Address 7925 HICKORY AVE			M M / D D / Y Y Y Y 06 04 2011			
	City	State	Zip Code	Transaction ID: INCA100143			
	RUSSELLS POINT	ОН	43348	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS		CLINICAL THERAPEUTICS				
	Receipt For: Primary General Other (specify) <b>v</b>	Aggregate	Year-to-Date <b>V</b> 325.00	]			
	SUBTOTAL of Receipts This Page (optional)		······	100.00			
	TOTAL This Period (last page this line number or	nly)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 166 / 434           (check only one)
	Any information copied from such Reports and Stat or for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC		ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MILAYNA SUBAR, MD			Date of Receipt
	Mailing Address 11 RIVERSIDE DRIVE #8CE			0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City NEW YORK	State NY	Zip Code 10023	Transaction ID: INCA100629 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP NATI	n ONAL PRACTICE LEADER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	1
в.	Full Name (Last, First, Middle Initial)	0 0		Date of Receipt
υ.	Mailing Address 5111 FLUSS CV N			M         M         D         D         Y
	City	State	Zip Code	Transaction ID: INCA100367
	BARTLETT FEC ID number of contributing federal political committee.	TN	38135	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	I	CUST SVC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
C.	Full Name (Last, First, Middle Initial) MS COLEEN SULLIVAN			Date of Receipt
	Mailing Address 38 BARKMILL TERRACI	E		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1
		State	Zip Code	Transaction ID: INCA100479
	MONTVILLE FEC ID number of contributing federal political committee.	C	07045	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n TECHNOLOGY	
	Receipt For: Primary General Other (specify) <b>▼</b>	Aggregate	e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number on	nly)	Þ	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 167 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17				
	Any information copied from such Reports and St or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to s						
ľ	NAME OF COMMITTEE (In Full)							
	> MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)						
A.	Full Name (Last, First, Middle Initial) MR MARK SULLIVAN			Date of Receipt				
	Mailing Address 16025 PINE VALE PL.			M · M         /         D · D         /         Y · Y · Y · Y         Y         Y · Y · Y         Y				
	City	State	Zip Code	Transaction ID: INCA100084				
	MIDLOTHIAN	VA	23113	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio BUSINE	n SS PROCESS SPECIALIST					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	650.00	]				
В.	Full Name (Last, First, Middle Initial) MR FREDERICK SUMNER			Date of Receipt				
	Mailing Address 808 HOLLYWOOD AV	ENUE		0 6 0 4 Y Y Y Y Y 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100162				
	HO-HO-KUS	NJ	07423	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n MARKET STRATEGY					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼	0 0	325.00					
С.	Full Name (Last, First, Middle Initial) MS IRENE SUTTON			Date of Receipt				
	Mailing Address 20 AVENUE @ PORT APT 209	IMPERIAL		M M / D D / Y Y Y Y Y 06 04 2011				
	City	State	Zip Code	Transaction ID: INCA100172				
	WEST NEW YORK	NJ	07093	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		40.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	520.00					
	SUBTOTAL of Receipts This Page (optional)			115.00				
ľ	TOTAL This Period (last page this line number of	only)						

l	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Statements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 168 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17           on for the purpose of soliciting contributions         solicitions contributions			
	or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.						
۷ A.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT	MR TIMOTHY SWETT					
	Mailing Address 8362 GOLDEN PRAI	RIE DRIVE		0 6 / D D / Y Y Y Y 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100221			
	TAMPA FEC ID number of contributing federal political committee.	FL C	33647	Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM					
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 650.00	]			
- В.	Full Name (Last, First, Middle Initial) MARK TANKERSLEY Mailing Address 1374 SAWMILL CREI	FK LANE		Date of Receipt			
				06 04 2011			
	City State CORDOVA TN		Zip Code 38018	Transaction ID: INCA100685			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period			
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR MEDI	CAL INFORMATICS				
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 390.00	]			
- C.	Full Name (Last, First, Middle Initial) MR NICHOLAS TAYLOR			Date of Receipt			
	Mailing Address 2847 NORTHWEST E	BLVD		0 6 / <sup>D</sup> D / <sup>Y</sup> Y Y Y 0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100507			
	UPPER ARLINGTON	OH	43221	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	I	CAL SVCS	_			
	Receipt For: Primary General Other (specify) ▼		Year-to-Date 325.00	]			
	SUBTOTAL of Receipts This Page (optional) .			80.00			
ľ	TOTAL This Period (last page this line number	r only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Statomonto ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 169 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17		
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC.	a. Medco Health PAC)				
A.	Full Name (Last, First, Middle Initial) AMI THAKKAR	AMITHAKKAR				
	Mailing Address 1040 W ADAMS STR UNIT 248	EET		0 6 0 4 2 0 1 1		
	City CHICAGO	State IL	Zip Code 60607	Transaction ID: INCA100524		
	FEC ID number of contributing federal political committee.	C	00007	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR (	n CLINICAL SVCS	-		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]		
В.	Full Name (Last, First, Middle Initial) MR BOOBALAN THANGAVELU Mailing Address 13 BIRCH TERRACE			Date of Receipt		
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100534		
	MT ARLINGTON	NJ	07856	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	1	CAL SPECIALIST			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]		
С.	Full Name (Last, First, Middle Initial) MS MELINDA THIEL			Date of Receipt		
	Mailing Address 27 GARVEY ROAD			0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100182		
	WAYNE FEC ID number of contributing federal political committee.	NJ C	07470	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PRO	n DUCT DEVELOPMENT			
	Receipt For: Primary General Other (specify) <b>v</b>	Aggregate	e Year-to-Date ▼ 325.00	]		
	SUBTOTAL of Receipts This Page (optional) .			75.00		
	TOTAL This Period (last page this line number	r only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 170 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
		POLITICAL ACTION COMMITTEE (a.k.a.	
A.	Full Name (Last, First, Middle Initial) MS MELISSA THOMET	Date of Receipt	
	Mailing Address 721 HINMAN AVE #1E		0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City <u>EVANSTON</u>	State Zip Code	Transaction ID: INCA100090
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT OPS	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- B.	Full Name (Last, First, Middle Initial) MS MARY THORSBY Mailing Address 17326 ELLEN DR		Date of Receipt
		06 04 2011	
	City LIVONIA	State Zip Code MI 48152	Transaction ID: INCA100241 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1075.00	
- C.	Full Name (Last, First, Middle Initial) DREW THRAEN	I	Date of Receipt
	Mailing Address 63 STILES AVE	0 6 0 4 2 0 1 1	
		State Zip Code	Transaction ID: INCA100595
	MORRIS PLAINS FEC ID number of contributing federal political committee.	NJ 07950	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 171 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	a. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN	MR WILLIAM TOBIN				
	Mailing Address 838 COLONIAL RD			0 6 / D D / Y Y Y Y 0 2 0 1 1		
		State	Zip Code	Transaction ID: INCA100098		
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENE	FIT SYSTEMS SUPPORT			
	Receipt For:	Aggregate	Year-to-Date 🔻			
	Primary     General       Other (specify) ▼	0 0	650.00			
в.	Full Name (Last, First, Middle Initial) MRS CHINNERETH TORRACA			Date of Receipt		
	Mailing Address 95 ERNST AVENUE			0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1		
	City State		Zip Code	Transaction ID: INCA100116		
	BLOOMFIELD	NJ 07003		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	NT REQUIREMENTS			
	Receipt For: Primary General	Aggregate	Year-to-Date V	_		
	Other (specify) ▼	0 0	325.00			
C.	Full Name (Last, First, Middle Initial) SHERRY TOWNSEND			Date of Receipt		
	Mailing Address 1327 FAIRWAY FORE	EST DRIVE E	AST	0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100670		
	CORDOVA	TN	38016	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer ACCREDO HEALTH GROUP	Occupation				
	Receipt For:	Aggregate	Year-to-Date V			
	Other (specify) ▼	0 0	325.00			
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 172 / 434           (check only one)
	Any information copied from such Reports and St or for commercial purposes, other than using the	name and ad	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	> MEDCO HEALTH SOLUTIONS INC. P	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial)	Date of Receipt		
	Mailing Address 150 BRADFORD DR.			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100054
	SCHWENKSVILLE	PA	19473	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	on CAL SPECIALIST	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		325.00	1
	Other (specify)	0 0		1
в.	Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER			Date of Receipt
	Mailing Address 713 INDIAN CREEK RI	D		M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         0 4         2 0 1 1         1
	City	State	Zip Code	Transaction ID: INCA100348
	AMHERST	VA	24521	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on GOVERNMENT AFFAIRS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	1560.00	]
C.	Full Name (Last, First, Middle Initial) MS DENISE TULP			Date of Receipt
	Mailing Address 685 SHAWNEE DRIVE			M · M         /         D · D         /         Y · Y · Y · Y         Y         Y · Y · Y · Y         Y
	City	State	Zip Code	Transaction ID: INCA100296
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SAFE		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	650.00	
	SUBTOTAL of Receipts This Page (optional)			195.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X)		Use separate scheo	hulo(s)	FOR LINE NUMBER: PAGE 173 / 434			
	ITEMIZED RECEIPTS		for each category of the	(check only one)				
	II EIVIIZED RECEIPIS			Detailed Summary Page	X 11a 11b 11c 12			
			,	Ŭ	13 14 15 16 17			
	Any information copied from such Reports and St	atements ma	y not be sold or used by	any persor	n for the purpose of soliciting contributions			
	or for commercial purposes, other than using the	solicit contributions from such committee.						
		NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. P	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a.						
Α.	Full Name (Last, First, Middle Initial) ANN TURI	Date of Receipt						
Λ.	Mailing Address 764 COMANCHE LANE	=						
		-			06 04 2011			
	City	State	Zip Code		Transaction ID: INCA100643			
	FRANKLIN LAKES	NJ	07417		Amount of Each Receipt this Period			
	FEC ID number of contributing							
	federal political committee.	C			25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio						
			OUNSEL		_			
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General	-	32	5.00				
	Other (specify)			.0.00				
Б	Full Name (Last, First, Middle Initial)				Data of Descript			
В.					Date of Receipt			
	Mailing Address 37 KNOLL TERRACE				06 04 2011			
	City	Zip Code		Transaction ID: INCA100299				
	HAZLET	07730						
		NJ	07730	_	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C			30.77			
	rederar political committee.							
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n		7			
	MEDCO HEALTH SOLUTIONS	SR DIR	TECHNOLOGY					
	Receipt For:	Aggregate Year-to-Date 🔻						
	Primary General		40	0.01				
	Other (specify)		40	0.01				
~	Full Name (Last, First, Middle Initial)							
C.	JEFF ULANET				Date of Receipt			
	Mailing Address 8803 BELMART RD				0 6 0 4 2 0 1 1			
	City	State	Zip Code		Transaction ID: INCA100637			
	POTOMAC	MD	20854					
			20034	_	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C			50.00			
	rederal political committee.							
	Name of Employer ACCREDO HEALTH GROUP	Occupatio	n		7			
		VP BUS	DEV - ONCOLOGY	/				
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General			0.00				
	Other (specify) 🔻		65	0.00				
	SUBTOTAL of Receipts This Page (optional)			🕨	105.77			
				·				
	TOTAL This Period (last page this line number of	only)		🕨				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 174 / 434         (check only one)       Image: Check only one)         X       11a       11b       11c       12         I3       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	AMEDCO HEALTH SOLUTIONS INC. P	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)	Date of Receipt	
	Mailing Address 6 LAURA LANE		0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100327
	KATONAH	NY 10536	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR LOGISTICS	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	325.00	
в.	Full Name (Last, First, Middle Initial) MR KEITH URICH		Date of Receipt
	Mailing Address 12495 SOUTH 1745 E	AST	0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100267
	DRAPER	UT 84020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM ACCOUNT SERVICES	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	325.00	
с.	Full Name (Last, First, Middle Initial) MRS JENNIFER UTTERDYKE		Date of Receipt
	Mailing Address 1881 GREENTREE RC	DAD	0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100187
	LEBANON	OH 45036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MEDICATION SAFETY/QUALITY	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	650.00	
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 175 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL AC	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS CARA VAN ZILE	Date of Receipt		
	Mailing Address 31 LINCOLN RD			0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INCA100235
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR	ANALYTICAL SVCS	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	′ear-to-Date ▼ 650.00	]
- В.	Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA Mailing Address 35507 N VIA TRAMON	NTO		Date of Receipt
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100660
	PHOENIX	AZ	85086	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1	NERAL MGR	
	Receipt For: Primary General Other (specify) ♥	Aggregate Y	′ear-to-Date ▼ 2496.00	]
- C.	Full Name (Last, First, Middle Initial) MRS JEANNINE VANKLEECK	1		Date of Receipt
	Mailing Address 56 ZIMMER AVENUE			M M / D D / Y Y Y Y 06 04 2011
	City MIDLAND PARK	State NJ	Zip Code 07432	Transaction ID: INCA100121 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINAN	ICIAL APPLICATIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	′ear-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)	•		267.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 176 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
ſ	Any information copied from such Reports and St or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	Medco Health PAC)	
۷ A.	Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS	Date of Receipt	
	Mailing Address 105 ARRANDALE RD		0 6 / D D / Y Y Y Y 0 6 / 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100341
	ROCKVILLE CENTRE	NY 11570	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	650.00	
- В.	Full Name (Last, First, Middle Initial) MR WIL VELARDE		Date of Receipt
	Mailing Address 443 WEST SADDLE R	M M / D D / Y Y Y Y 06 04 2011	
	City	State Zip Code	Transaction ID: INCA100170
	UPPER SADDLE RIVER	NJ 07458	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRODUCT	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	390.00	
- C.	Full Name (Last, First, Middle Initial) MR JEFFREY VERNICE		Date of Receipt
	Mailing Address 201 WATCHUNG AVE UNIT #17	NUE	M · M         /         D · D         /         Y · Y · Y · Y         Y           06         04         2011         1
	City	State Zip Code	Transaction ID: INCA100165
	BLOOMFIELD	NJ 07003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR COMPLIANCE	
	Receipt For: Primary General	Aggregate Year-to-Date	
	Other (specify) ▼	325.00	
ſ	SUBTOTAL of Receipts This Page (optional)	····· •	105.00
Ī	TOTAL This Period (last page this line number of	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:     PAGE 177 / 434       (check only one)     11a       X     11a       11b     11c       12
[	Any information copied from such Reports and S or for commercial purposes, other than using the	13     14     15     16     17       on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) MR GORDON VICKERS	Date of Receipt		
	Mailing Address 436 MOUNTAIN AVEN	IUE		0 6 0 4 Y Y Y Y 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100057
	WESTFIELD FEC ID number of contributing federal political committee.	NJ C	07090	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	on CCT EXEC	
	Receipt For:	· ·	e Year-to-Date V	1
	Primary     General       Other (specify) ▼		325.00	]
- В.	Full Name (Last, First, Middle Initial) MR MUNISH VJ	I		Date of Receipt
	Mailing Address 11 BOULDER TRAIL			0 6 0 4 Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA100536
	MAHWAH FEC ID number of contributing federal political committee.	NJ C	07430	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	_ I	CHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
- C.	Full Name (Last, First, Middle Initial) MR STEVEN VREELAND			Date of Receipt
	Mailing Address 19 ANNA STREET			0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100571
	DENVILLE	NJ	07834	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	· ·	CHNOLOGY	_
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
	SUBTOTAL of Receipts This Page (optional)		••••••	75.00
	TOTAL This Period (last page this line number	only)	•	

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 178 / 434
			for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Lotanou ourmany rugo	13 14 15 16 17
	Any information copied from such Reports and Sta	tements mag	y not be sold or used by any perso	n for the purpose of soliciting contributions
	or for commercial purposes, other than using the n	ame and ad	dress of any political committee to	solicit contributions from such committee.
	$\rightarrow$ MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial)			
Α.	MR DANIEL WALDEN			Date of Receipt
	Mailing Address 450 BEECHMONT DR			M M / D D / Y Y Y
				06 04 2011
	City	State	Zip Code	Transaction ID: INCA100398
	NEW ROCHELLE	NY	10804	Amount of Each Receipt this Period
	FEC ID number of contributing	С		192.31
	federal political committee.			
	Name of Employer	Occupatio	n	-
	Name of Employer MEDCO HEALTH SOLUTIONS		 GULATORY & MC PROGRA	Ms
	Receipt For:	Aggregate	e Year-to-Date 🔻	-
	Primary General	33 - 3		
	Other (specify) <b>v</b>		2500.03	
_	Full Name (Last, First, Middle Initial)			
В.	MS THERESE WALKER			Date of Receipt
	Mailing Address 363 MULBERRY CT			0 6 0 4 Y Y Y Y 0 1 0 0 4 2 0 1 1
	City	State	Zip Code	
	WYCKOFF	NJ		Transaction ID: INCA100074
		INJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		
		SR DIR I	PRODUCT MGMT	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		325.00	
	Other (specify)			
	Full Name (Last, First, Middle Initial)			
C.	MR WILLIAM WALLACE			Date of Receipt
-	Mailing Address 5445 GOODWIN AVEN	UE		M M / D D / Y Y Y Y
		-		06 04 2011
	City	State	Zip Code	Transaction ID: INCA100538
	DALLAS	TX	75206	Amount of Each Receipt this Period
	FEC ID number of contributing	С		192.31
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n	-
	MEDCO HEALTH SOLUTIONS		ES SEGMENT LEADER	
			e Year-to-Date 🔻	
	Primary General			
	Other (specify)	0_0_0	2500.03	
				400.00
	SUBTOTAL of Receipts This Page (optional)		••••••	409.62
	TOTAL This Period (last page this line number or			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 179 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
A	ny information copied from such Reports and s	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full)	POLITICAL ACTION COMMITTEE (a.k.a	
∠ A.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE	Date of Receipt	
	Mailing Address 5 APPLE ORCHARD	RD	0 6 0 4 Y Y Y Y Y 0 1 1
	City	State Zip Code	Transaction ID: INCA100355
	MOORESTOWN FEC ID number of contributing federal political committee.	NJ 08057	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
— B.	Full Name (Last, First, Middle Initial) LYNETTE WASHINGTON Mailing Address 4272 MELWOOD OA	K DR	Date of Receipt
	City		
		State Zip Code TN 38002	Transaction ID: INCA100671 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR TRC	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
 C.	Full Name (Last, First, Middle Initial) MS CATHERINE WASSON		Date of Receipt
	Mailing Address 3912 CALLE ANDALL	JCIA	0 6 0 4 2 0 1 1
		State Zip Code	Transaction ID: INCA100102
	SAN CLEMENTE FEC ID number of contributing federal political committee.	CA 92673	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATL ACCTS	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
s	SUBTOTAL of Receipts This Page (optional) .	·	125.00
T	<b>OTAL</b> This Period (last page this line number	r only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 180 / 434 (check only one) X 11a 11b 11c 12
	Any information copied from such Reports and S	statements mag	y not be sold or used by any perso	13 14 15 16 17
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	solicit contributions from such committee.		
	Full Name (Last, First, Middle Initial)	, 		
A.	MS BEVERLY WATSON Mailing Address 2 MICHELANGELO CO		Date of Receipt	
	City	State	Zip Code	Transaction ID: INCA100391
	SOMERSET FEC ID number of contributing federal political committee.	NJ C	08873	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR BEN	n IEFIT DELIVERY SYSTEMS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
- 3.	Full Name (Last, First, Middle Initial) MR SHERMAN WEAVER Mailing Address 4850 MCCOY CIRCLE	I		Date of Receipt
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100584
	CUMMING	GA	30040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		26.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 338.00	]
_	Full Name (Last, First, Middle Initial) MRS KELLY WEBBER			Date of Receipt
	Mailing Address 107 UPPER SADDLE	RIVER ROA	١D	M M / D D / Y Y Y Y 06 04 2011
	City MONTVALE	State NJ	Zip Code	Transaction ID: INCA100326
	FEC ID number of contributing federal political committee.	C	07645	Amount of Each Receipt this Period 100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP COR		1
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 1300.00	]
	SUBTOTAL of Receipts This Page (optional)			151.00
	TOTAL This Period (last page this line number	only)	·····	
	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 181 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17	
---------	---	---	--	
	Any information copied from such Reports and Si or for commercial purposes, other than using the	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	Medco Health PAC)		
∠ A.	Full Name (Last, First, Middle Initial) MARK WEGRYN		Date of Receipt	
	Mailing Address 13709 SMOKEY RIDG	ETRACE	0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100279	
	CARMEL	IN 46033	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	25.00	
	Name of Employer ACCREDO HEALTH GROUP	Occupation AVP QA AND PRODUCT INTEGRAT	Π IΦN	
	Receipt For:	Aggregate Year-to-Date 🔻		
	Primary     General       Other (specify) ▼	325.00		
- В.	Full Name (Last, First, Middle Initial) LOWELL WEINER		Date of Receipt	
	Mailing Address 1 BURGESS COURT	M M / D D / Y Y Y Y 06 04 2011		
	City	State Zip Code	Transaction ID: INCA100601	
	WESTFIELD	NJ 07090	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP COMMUNICATIONS	_	
	Receipt For:	Aggregate Year-to-Date ▼		
	Other (specify) ▼	650.00		
– C.	Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH		Date of Receipt	
	Mailing Address 309 WATERVIEW DR		M M / D D / Y Y Y Y 06 04 2011	
	City	State Zip Code	Transaction ID: INCA100196	
	FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		192.31	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP PRES EMPLOYER GROUP	_	
	Receipt For:	Aggregate Year-to-Date ▼		
	Other (specify) ▼	2500.03		
ſ	SUBTOTAL of Receipts This Page (optional)	······	267.31	
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 182 / 434           (check only one)         11a         11b         11c         12           X         11a         11b         11c         12           13         14         15         16         17			
	or for commercial purposes, other than using the	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to s					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
× ٨.	Full Name (Last, First, Middle Initial) MR KENNETH WERMES			Date of Receipt			
	Mailing Address 26037 N WRANGLER	RD		0 6 / 0 4 / Y Y Y Y 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100312			
	SCOTTSDALE FEC ID number of contributing federal political committee.	AZ	85255	Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on GENERAL MGR	_			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 2300.00				
-	Full Name (Last, First, Middle Initial) MRS TAMARA WHITLEY Mailing Address 5847 CLENDENIN AVE	E		Date of Receipt			
	City	State	Zip Code	0 6 0 4 2 0 1 1 Transaction ID: INCA100068			
	DALLAS	ТХ	75228	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer ACCREDO HEALTH GROUP	1 · ·	SINESS REQUIREMENTS				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]			
-	Full Name (Last, First, Middle Initial) MS KIM WILLIAMS			Date of Receipt			
	Mailing Address 24 PENNINGTON AVE	1		0 6 / D D / Y Y Y Y 0 6 0 4 2011			
	City	State	Zip Code	Transaction ID: INCA100471			
	COLONIA FEC ID number of contributing federal political committee.	NJ C	07067	Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	m RMACY NETWORK MGMT				
	Receipt For: Primary General Other (specify) ▼	I I	e Year-to-Date V 650.00	]			
ſ	SUBTOTAL of Receipts This Page (optional)			275.00			
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		·	275.00			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER:       PAGE 183 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold name and address of any	d or used by any perso political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
ľ	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION C	OMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON	Date of Receipt		
	Mailing Address 2 TIFFANY ROAD			0 6 0 4 Y Y Y Y 0 6 0 4 2 0 1 1
	City	State Zip Co	de	Transaction ID: INCA100276
	MORRISTOWN	NJ 07960		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING		
	Receipt For:	Aggregate Year-to-Da	te 🔻	
	Other (specify) ▼		650.00	
В.	Full Name (Last, First, Middle Initial) MS COLETTE WILSON			Date of Receipt
	Mailing Address 16608 56TH PL W			06 / D D / Y Y Y Y 06 / 04 2011
	City	State Zip Co		Transaction ID: INCA100204
	LYNNWOOD	WA 98037		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EX	-	
	Receipt For: Primary General	Aggregate Year-to-Da	ite 🔻	
	Other (specify)		325.00	
с.	Full Name (Last, First, Middle Initial) MS BEVERLY WINKLER			Date of Receipt
	Mailing Address 17 LYNWOOD RD			0 6 / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 1
	City	State Zip Co		Transaction ID: INCA100418
		NJ 07044		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ORG DEV		
	Receipt For: Primary General	Aggregate Year-to-Da	te 🔻	
	Other (specify) ▼		325.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 184 / 434           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
⊻ ۹.	Full Name (Last, First, Middle Initial) JAMES WINTRAUB			Date of Receipt
	Mailing Address 2166 BROADWAY AF		0 6 0 4 Y Y Y Y 0 1 1	
	City	State	Zip Code	Transaction ID: INCA100604
	NEW YORK	NY	10024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CRE	n ATIVE DEVELOPMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
- 3.	Full Name (Last, First, Middle Initial) MARY JANE WISEMAN			Date of Receipt
	Mailing Address 33 KNOLL ROAD	0 6 / D D / Y Y Y Y 0 6 0 4 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100692
	WAYNE FEC ID number of contributing federal political committee.	NJ C	07470	Amount of Each Receipt this Period 75.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio	n SING SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 975.00	]
-	Full Name (Last, First, Middle Initial) MR MICHAEL WISNIEWSKI			Date of Receipt
	Mailing Address 23 DRUID HILL DR			M M / D D / Y Y Y Y 06 04 2011
	City	State	Zip Code	Transaction ID: INCA100480
	PARSIPPANY	NJ	07054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR (	n CONTRACT ADMINISTRATI	on
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]
Γ	SUBTOTAL of Receipts This Page (optional)	1		125.00

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 185 / 434			
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)			
ŗ							
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN			Date of Receipt			
	Mailing Address 145 WAUGHAW ROA	D		0 6 0 4 Y Y Y Y 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100214			
	TOWACO	NJ	07082	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	on IANCIAL & ANALYTICAL SV(				
	Receipt For:		e Year-to-Date 🔻	5			
	Primary General	33 - 3	650.00				
	Other (specify)	0 0					
в.	Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH			Date of Receipt			
	Mailing Address 43 AZALEA PLACE	ing Address 43 AZALEA PLACE					
	City	State	Zip Code	Transaction ID: INCA100099			
	PISCATAWAY	NJ	08854	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR		-			
	Receipt For:	Aggregate	e Year-to-Date 🔻	-			
	Primary     General       Other (specify) ▼	0 0	390.00				
C.	Full Name (Last, First, Middle Initial) MRS TARA WOLCKENHAUER	I		Date of Receipt			
0.	Mailing Address 1730 DOGWOOD CR	EEK DRIVE		0 6 0 4 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100291			
	GERMANTOWN	TN	38139	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer ACCREDO HEALTH GROUP	Occupatio GROUP					
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify) ▼		650.00				
	SUBTOTAL of Receipts This Page (optional)	I		130.00			
			•				
	TOTAL This Period (last page this line number	only)	••••••				

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 186 / 434 (check only one)
ľ	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
_			Detailed Summary Faye	13 14 15 16 17
1	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements main name and ad	y not be sold or used by any personderss of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)			
Z	> MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS CYNTHIA WOOD	Date of Receipt		
	Mailing Address 4002 FALCON LAKE	DR		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100406
	ARLINGTON	TX	76016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRC	n DFESS PRACTICES POLICI	IE\$
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		325.00	
_	Other (specify)			
В.	Full Name (Last, First, Middle Initial) MS JUDITH WOOD			Date of Receipt
υ.	Mailing Address 76 COLONIAL ROAD			M M / D D / Y Y Y Y 0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100470
	STILLWATER	NY	12170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR /	n ACCT MGMT OPS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify)	0 0	325.00	]
– c.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER WOODYARD	I		Date of Receipt
	Mailing Address 538 RAVEN CIRCLE			0 6 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100369
	BROWNSBURG	IN	46112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n XHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify)	0 0	325.00	
Γ			0 0 0 0 0 0 0 0 0	62.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 187 / 434           (check only one)         11c           X         11a           12         14           15         16
	Any information copied from such Reports and Si or for commercial purposes, other than using the	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)	OLITICAL ACTION COMMITTEE (a.k.a.	
۷ A.	Full Name (Last, First, Middle Initial) MR SERGEY YANITSKIY		Date of Receipt
	Mailing Address 793 LINCOLN AVE		06 / 04 / Y Y Y Y 011 / 04
	City	State Zip Code	Transaction ID: INCA100161
		NJ 07442	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	325.00	
– В.	Full Name (Last, First, Middle Initial) MS SARAH YINGLING		Date of Receipt
	Mailing Address 901 ST MARKS AVE	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA100292
	WESTFIELD	NJ 07090	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MEDICARE OPS	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	325.00	
– c.	Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR		Date of Receipt
	Mailing Address 219 SPOOK ROCK RE	).	0 6 0 4 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100380
	<u>SUFFERN</u>	NY 10901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		192.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & CHIEF INFO OFFICER	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	1220.00	
Γ	SUBTOTAL of Receipts This Page (optional)		242.50
	TOTAL This Period (last page this line number of	only)	

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 188 / 434		
		Use separate schedule(s) for each category of the	(check only one)		
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12		
		Detailed Summary Page			
	Any information copied from such Reports and Sta	n for the purpose of soliciting contributions			
	or for commercial purposes, other than using the n	ame and address of any political committee to	solicit contributions from such committee.		
1					
	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL ACTION COMMITTEE (a.K.a.	. Medco Health PAC)		
	/				
Α.	Full Name (Last, First, Middle Initial) MS JILL ZELMAN		Date of Receipt		
А.		:0 DI	· ·		
	Mailing Address 43604 EMERALD DUNE	S PL	0 6 0 4 2 0 1 1		
	<b>O</b> th .	Chata Zia Oada			
	City	State Zip Code	Transaction ID: INCA100436		
	LEESBURG	VA 20176	Amount of Each Receipt this Period		
	FEC ID number of contributing		50.00		
	federal political committee.		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
		VP FINANCE	_		
	Receipt For:	Aggregate Year-to-Date 🔻			
	Primary General	, 450.00			
	Other (specify)				
	Full Name (Last, First, Middle Initial)				
В.	ANATOLY ZHELEZNYAK		Date of Receipt		
	Mailing Address 5 DENISE COURT		M M / D D / Y Y Y		
	•		06 04 2011		
	City	State Zip Code	Transaction ID: INCA100521		
	MANALAPAN	NJ 07726	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С	25.00		
	rederal political committee.				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
	MEDCO HEALTH SOLUTIONS	TECHNICAL SPECIALIST			
	Receipt For:	Aggregate Year-to-Date V	_		
	Primary General	Aggregate real-to-Date +			
	Other (specify)	325.00			
	Full Name (Lest First Midelle Initial)				
C.	Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI		Date of Receipt		
э.	Mailing Address 6691 DEERVIEW DRIVI	-			
	Maining Address 0091 DEERVIEW DRIVE	=	06 04 2011		
	City	State Zip Code	Transaction ID: INCA100260		
	LOVELAND				
		OH 45140	Amount of Each Receipt this Period		
	FEC ID number of contributing	С	25.00		
	federal political committee.				
	Name of Employer	Occupation	-		
	Name of Employer MEDCO HEALTH SOLUTIONS	VP/GM			
	Receipt For:		-1		
		Aggregate Year-to-Date ▼			
		650.00			
	Other (specify)				
,					
	SUBTOTAL of Receipts This Page (optional)	·····	100.00		
		-			
	TOTAL This Period (last page this line number or	nlv)			
		*/			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 189 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions		
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ANTHONY ZOLFO Mailing Address 217 FOREST RIDGE (	COURT		Date of Receipt
		000111		06 04 2011
		State	Zip Code	Transaction ID: INCA100544
	FRANKLIN LAKES FEC ID number of contributing federal political committee.	NJ C	07417	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST CO		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
— 3.	Full Name (Last, First, Middle Initial) MS MICHELE AGNEW Mailing Address 2433 ANDERSON PAI	RK DRIVE		Date of Receipt
	City	State	Zip Code	0 6 1 1 2 0 1 1 Transaction ID: INCA100792
	HENDERSON	NV	89044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR HR	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
	Full Name (Last, First, Middle Initial) MR JOHN AHLER			Date of Receipt
	Mailing Address 2677 SKELTON LANE			M M / D D / Y Y Y Y 06 / 11 / 2011
	City	State	Zip Code	Transaction ID: INCA101260
	BLACKLICK, FEC ID number of contributing federal political committee.	ОН	43004	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
Γ	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 sche for each category o Detailed Summary	
	Any information copied from such Reports and Si or for commercial purposes, other than using the	atements may not be sold or used b name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	> MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITT	EE (a.k.a. Medco Health PAC)
<b>A</b> .	Full Name (Last, First, Middle Initial) MS CARMEN BERG		Date of Receipt
	Mailing Address P O BOX 1373		06 / <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>
	City	State Zip Code	Transaction ID: INCA101149
	MEDICAL LAKE	WA 99022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
	Receipt For:	Aggregate Year-to-Date V	
	Other (specify) ▼	32	25.00
в.	Full Name (Last, First, Middle Initial) MR ANDREW BIDINOTTO		Date of Receipt
	Mailing Address 7728 GRACE DRIVE		M M / D D / Y Y Y Y 06 11 2011
	City	State Zip Code	Transaction ID: INCA100827
	NORTH RICHLAND HIL	TX 76182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS PROCESS CHA	AMPION
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) 🔻	33	25.00
с.	Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO		Date of Receipt
	Mailing Address 26 DAYLILY DRIVE		0 6 / D D / Y Y Y Y 2 0 1 1
		State Zip Code	Transaction ID: INCA101291
	MOUNT LAUREL	NJ 08054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP HR	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	6	50.00
	SUBTOTAL of Receipts This Page (optional)		50.00
	TOTAL This Period (last page this line number		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 191 / 434           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma	y not be sold or used by any perso	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F			
۷ A.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX			Date of Receipt
	Mailing Address 6527 SHORBURGH D	RIVE		0 6 / D D / Y Y Y Y 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100775
	INDIANAPOLIS	IN	46278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n ARM PRACTICE	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	650.00	
- В.	Full Name (Last, First, Middle Initial) MR MARVEN CHIN			Date of Receipt
	Mailing Address 1604 SNOWBERRY D	M M / D D / Y Y Y Y 06 11 2011		
	City	State	Zip Code	Transaction ID: INCA101269
	WILLIAMSTOWN	NJ	08094	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR QUA		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	
- C.	Full Name (Last, First, Middle Initial) MRS MARLENE CLEMENT			Date of Receipt
	Mailing Address 42 MESQUITE VILLAC	GE CIR		M M / D D / Y Y Y Y 06 11 2011
	City	State	Zip Code	Transaction ID: INCA100978
	HENDERSON	NV	89012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CUS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			50.00
ľ	TOTAL This Period (last page this line number	only)	·····	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 192 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17				
	Any information copied from such Reports and St or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to s						
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)				
A.	Full Name (Last, First, Middle Initial) MR JASON COLE			Date of Receipt				
	Mailing Address 14917 E BELLA VISTA			0 6 1 1 Y Y Y Y 0 6 1 1 1 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA100994				
	VERADALE	WA	99037	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	on					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼		650.00	]				
- B.	Full Name (Last, First, Middle Initial) MR PATRICK DENNIS			Date of Receipt				
	Mailing Address 2344 FRENCH ALPS A	Mailing Address 2344 FRENCH ALPS AVE.						
	City	State	Zip Code	Transaction ID: INCA100904				
	HENDERSON	NV	89044	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on					
	Receipt For:	Aggregate	e Year-to-Date 🔻	_				
	Other (specify) ▼	0 0	650.00					
- C.	Full Name (Last, First, Middle Initial) MS TAMARA DIDYK			Date of Receipt				
	Mailing Address 136 BEAVER RUN RD			0 6 / D D / Y Y Y Y 0 1 1 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA101060				
		NJ	07848	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		12.50				
	Name of Employer MEDCO HEALTH SOLUTIONS		TERPRISE OPS					
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼	0 0	325.00					
	SUBTOTAL of Receipts This Page (optional)		······	62.50				
	TOTAL This Period (last page this line number of	only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 193 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	or for commercial purposes, other than using the	e name and ad	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	i. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) WILLIS DINGLE			Date of Receipt
	Mailing Address 905 SW SCRUB OAK	AVE		0 6 / D D / Y Y Y Y 0 6 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100908
	PALM CITY	FL	34990	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	1300.00	]
в.	Full Name (Last, First, Middle Initial) MS LYNDA DOREMUS			Date of Receipt
	Mailing Address 16 E HOMESTEAD A	VE		0 6 / D D / Y Y Y Y 0 6 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101029
	COLLINGSWOOD	NJ	08108	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	650.00	
с.	Full Name (Last, First, Middle Initial) KELLY ELLIS	1		Date of Receipt
	Mailing Address 106 HENRY SEWALL	WAY		0 6 / 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101424
	STUART	FL	34996	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 1	MARKETING	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number	<sup>-</sup> only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 194 / 434         (check only one)
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements main name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA			Date of Receipt
	Mailing Address 2354 DOLPHIN CT			06 / D D / Y Y Y Y 2011
	City	State	Zip Code	Transaction ID: INCA101013
	HENDERSON FEC ID number of contributing federal political committee.	NV C	89074	Amount of Each Receipt this Period 15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		
	Receipt For: Primary General		e Year-to-Date	1
	Other (specify) <b>v</b>	0 0	390.00	
В.	Full Name (Last, First, Middle Initial) MR JOHN FORD			Date of Receipt
	Mailing Address 6 SILVER LAKE DRIVE			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA101032
	SHAMONG FEC ID number of contributing federal political committee.	C	08088	Amount of Each Receipt this Period 15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 390.00	]
C.	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt
	Mailing Address 9 GREEN HILL TRAIL			M M / D D / Y Y Y Y 06 11 2011
	City TROPHY CLUB	State	Zip Code	Transaction ID: INCA101084
	FEC ID number of contributing federal political committee.	TX C	76262	Amount of Each Receipt this Period 100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP NA	n TIONAL SERVICE CENTER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 2600.00	]
	SUBTOTAL of Receipts This Page (optional)			130.00
	TOTAL This Period (last page this line number o	only)		

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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 195 / 434
	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ROBERT GIBBS			Date of Receipt
	Mailing Address 544 DENMOOR COUR	T		0 6 / D D / Y Y Y Y 0 6 / 1 1 / 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100833
	GALLOWAY	OH	43119	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		_
	Receipt For:	Aggregate	e Year-to-Date 🔻	1
	Primary General		325.00	1
	Other (specify) <b>v</b>	0 0	323.00	
В.	Full Name (Last, First, Middle Initial) FRANK HARVEY			Date of Receipt
Б.	Mailing Address 154 SW PALM COVE [	ORIVE		0 6 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101423
	PALM CITY	FL	34990	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n HEF MARKETING OFFICER	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		650.00	]
C.	Full Name (Last, First, Middle Initial) MR JOHN HOLLINGER			Date of Receipt
	Mailing Address 784 CAPE HENRY DR			0 6 / 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101071
	COLUMBUS	OH	43228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on SINESS PLANNING	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		260.00	]
	SUBTOTAL of Receipts This Page (optional)			72.50
	TOTAL This Period (last page this line number of			
		y,	·····	

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 196 / 434
	· · ·	Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
1	NAME OF COMMITTEE (In Full)		
		OLITICAL ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR BERNARD HUKILL		Date of Receipt
	Mailing Address 17219 CLOVIS		06 / <sup>D</sup> D / <u>Y Y Y Y</u> 2011
	City	State Zip Code	Transaction ID: INCA101114
	HELOTES	TX 78023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM OPS	-
	Receipt For:	Aggregate Year-to-Date ▼	-
	Primary General		
	Other (specify)	1300.00	
- В.	Full Name (Last, First, Middle Initial) LINDA ISHAM		Date of Receipt
	Mailing Address 1644 SE BALLANTRAE	BLVD	M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA101016
	PORT ST LUCIE	FL 34952	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS PLANNING	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	325.00	
- C.	Full Name (Last, First, Middle Initial) MR RICHARD JONES		Date of Receipt
	Mailing Address 12224 MONTCALM ST	REET	0 6 / 1 1 / 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101140
	CARMEL	IN 46032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	650.00	
[	SUBTOTAL of Receipts This Page (optional)		100.00
ŀ			
	TOTAL This Period (last page this line number of	pnly)	

c	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 197/434
	•		Use separate schedule(s) for each category of the	(check only one)
I	TEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	13     14     15     16     17       In for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR DENNIS KACKLEY			Date of Receipt
	Mailing Address 32 EAST RIVERGLEN	DR		0 6 / D D / Y Y Y Y 0 6 1 1 / 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101074
	WORTHINGTON	OH	43085	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CUS		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	]
— В.	Full Name (Last, First, Middle Initial) MR BRICE LOVE			Date of Receipt
	Mailing Address 2390 BRANDON RD			0 6 / D D / Y Y Y Y 0 6 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100999
	COLUMBUS	OH	43221	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)	0 0	325.00	
– C.	Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
•	Mailing Address 1066 WEST GROVE C	т		0 6 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100899
	GIBSONIA	PA	15044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	780.00	
	SUBTOTAL of Receipts This Page (optional)			55.00
F	TOTAL This Period (last page this line number of	only)	· · · · · · · · · · · · · · · · · · ·	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary P	
	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or used by name and address of any political cor	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	OLITICAL ACTION COMMITTE	E (a.k.a. Medco Health PAC)
۷ A.	Full Name (Last, First, Middle Initial) ROBERT MARK		Date of Receipt
	Mailing Address 1976 NE RIVER COUR	RT	M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA101412
	JENSEN BEACH FEC ID number of contributing federal political committee.	FL 34957	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP & CHIEF SALES OFFICE	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
_	Other (specify)	650	0.00
В.	Full Name (Last, First, Middle Initial) MR ERIC MCPHERSON Mailing Address 15008 EAGLEPARK P	L	Date of Receipt
			06 11 2011
	City LITHIA	State Zip Code FL 33547	Transaction ID: INCA101185 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	5.00
- C.	Full Name (Last, First, Middle Initial) EDWARD MERIWETHER		Date of Receipt
	Mailing Address 5858 SALISBURY DR.		M M / D D / Y Y Y Y 06 11 2011
	City ROANOKE	State Zip Code VA 24018	Transaction ID: INCA101419 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM CALL CENTER OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 650	0.00
ſ	SUBTOTAL of Receipts This Page (optional)		112.50
f	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 199 / 434 (check only one)
1			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may no	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL AC	TION COMMITTEE (a.k.a	a. Medco Health PAC)
۷ ۸.	Full Name (Last, First, Middle Initial) BRYAN MERRYMAN			Date of Receipt
	Mailing Address 4102 PARKSIDE DRIV	VE		M M / D D / Y Y Y Y 06 11 2011
		State	Zip Code	Transaction ID: INCA101358
	JUPITER FEC ID number of contributing federal political committee.	FL C	33458	Amount of Each Receipt this Period 40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP STRATE	EGIC SUPPORT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date <b>V</b> 520.00	]
-	Full Name (Last, First, Middle Initial) PHILLIP MONACO			Date of Receipt
	Mailing Address 835 NE STOKES TEF	(K		0 6 / D D / Y Y Y Y 0 6 / 1 1 / 2 0 1 1
	City JENSEN BEACH	State FL	Zip Code 34957	Transaction ID: INCA101417 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM	ACY PRACTICES	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 325.00	]
_	Full Name (Last, First, Middle Initial) KEVIN NESS			Date of Receipt
	Mailing Address 3872 SW RAMSPECK	< ST		0 6 / Y Y Y Y 0 1 1 2 0 1 1
	City PORT ST. LUCIE	State FL	Zip Code	Transaction ID: INCA101411
	FEC ID number of contributing federal political committee.	C	34953	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation LEAD SOLU	JTIONS ARCHITECT	1
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 325.00	]
Γ		1		90.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	<b>3X)</b> Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 200 / 434         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       17
Any information copied from such Report or for commercial purposes, other than us	s and Statements may not be sold or used by any person sing the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	INC. POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) A. MR BRYAN OLENIK		Date of Receipt
Mailing Address 22212 N. 36TH	ST	0 6 / D D / Y Y Y Y 0 6 / 1 1 2 0 1 1
City	State Zip Code	Transaction ID: INCA101156
PHOENIX FEC ID number of contributing	AZ 85050	Amount of Each Receipt this Period
federal political committee.		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify) <b>v</b>	325.00	
Full Name (Last, First, Middle Initial) B. MR JUN PARK		Date of Receipt
Mailing Address 2843 HONEYSU	JCKLE LANE	M M / D D / Y Y Y Y 06 11 2011
City	State Zip Code	Transaction ID: INCA101264
HILLIARD	OH 43026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS PROCESS CHAMPION	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	325.00	
Full Name (Last, First, Middle Initial) C. MR PAVLOS PAVLIDIS	I	Date of Receipt
Mailing Address 2780 FOLKSTO	NE ROAD	M M / D D / Y Y Y Y 06 11 2011
City	State Zip Code	Transaction ID: INCA100857
COLUMBUS FEC ID number of contributing	OH 43220	Amount of Each Receipt this Period 25.00
federal political committee.		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	650.00	
SUBTOTAL of Receipts This Page (opt	ional)	50.00
	number only)	

			[	<b></b>
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 201 / 434
	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements ma name and ad	⊥ In not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
			,	
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ARLENE PERAZELLA			Date of Receipt
	Mailing Address 600 NE BAYBERRY LA	ANE		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA101410
	JENSEN BEACH	FL	34957	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	on OPERATIONS	
	Receipt For:		e Year-to-Date V	-1
	Primary General	, iggi ogui		1
	Other (specify)	0 0	650.00	
в.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 400 HILLANDALE DR			M · M         /         D · D         Y         Y · Y · Y         Y           0 6         1 1         2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101425
	TROUTVILLE	VA	24175	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PAT	on TIENT SERVICES	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		325.00	]
C.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
<b>.</b>	Mailing Address 800 SANDY TRAIL			0 6 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101239
	KELLER	TX	76248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR HR	on	_
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	650.00	]
	SUBTOTAL of Receipts This Page (optional)	L	<b>`</b>	100.00
	TOTAL This Period (last page this line number	(iiiy)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 202 / 434           (check only one)         11a           X         11a           13         14           15         16           17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any personners of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS JENNIFER ROBERTS Mailing Address 1342 DALTON CT			Date of Receipt
	City	State	Zip Code	0 6 1 1 2 0 1 1 Transaction ID: INCA100902
	FAIRFIELD	OH	45014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date <b>V</b> 325.00	]
B.	Full Name (Last, First, Middle Initial) CHRISTOPHER RYAN	COURT		Date of Receipt
	Mailing Address 7690 HUMMINGBIRD (	COURT		0 6 1 1 Y Y Y Y 0 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101416
	WEST PALM BEACH FEC ID number of contributing federal political committee.	FL C	33412	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FIN		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
C.	Full Name (Last, First, Middle Initial) FRANCIS SCHULTE			Date of Receipt
	Mailing Address 5023 SW BERMUDA V	VAY		0 6 / D D / Y Y Y Y 0 1 1 / 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100929
	PALM CITY FEC ID number of contributing federal political committee.	FL C	34990	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC O	PS OFFICER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	]
	SUBTOTAL of Receipts This Page (optional)			87.50
	TOTAL This Period (last page this line number of	only)		

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 203 / 434         (check only one)       11a         X       11a       11b         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	e name and add	dress of any political committee to	o solicit contributions from such committee.
2 A.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 1767 FAIRMOUNT ST	REET		Date of Receipt
	City	State	Zip Code	Transaction ID: INCA101052
	CARMEL	IN	46032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1	OLOGY TRC OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 780.00	]
– B.	Full Name (Last, First, Middle Initial) MR MARK SHINKLE Mailing Address 4464 REPASS DRIVE			Date of Receipt
				06 11 2011
	City WESTFIELD	State IN	Zip Code	Transaction ID: INCA100890
	FEC ID number of contributing federal political committee.	C	46074	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n INESS PLANNING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 325.00	]
– C.	Full Name (Last, First, Middle Initial) MR ERIC SMITHER			Date of Receipt
	Mailing Address 1132 NORTH ST RT 1	23		0 6 / D D / Y Y Y Y 0 6 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100909
	LEBANON	OH	45036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS	6	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	]
Γ	SUBTOTAL of Receipts This Page (optional)			55.00
F	TOTAL This Period (last page this line number	only)		

commercial purposes, other than using the ME OF COMMITTEE (In Full) EDCO HEALTH SOLUTIONS INC. I Name (Last, First, Middle Initial) HN STAINES illing Address 4442 SE WATERFOF / UART C ID number of contributing eral political committee. me of Employer EDCO HEALTH SOLUTIONS ceipt For: Primary General Other (specify) ▼	e name and add POLITICAL A RD DR. State FL Occupation VP LIBER	ACTION COMMITTEE (a.k.a Zip Code 34997	(check only one)         X       11a       11b       11c       12         13       14       15       16       17         on for the purpose of soliciting contributions solicit contributions from such committee.       16       17         . Medco Health PAC)       Date of Receipt       0       0       1       1       2       0       1       1         Transaction ID: INCA101359       Amount of Each Receipt this Period       50.00       50.00       1       1       50.00       1
commercial purposes, other than using the ME OF COMMITTEE (In Full) EDCO HEALTH SOLUTIONS INC. I Name (Last, First, Middle Initial) HN STAINES illing Address 4442 SE WATERFOF / UART C ID number of contributing eral political committee. me of Employer EDCO HEALTH SOLUTIONS ceipt For: Primary General Other (specify) ▼	e name and add POLITICAL A RD DR. State FL Occupation VP LIBER	Zip Code 34997 CTION COMMITTEE (a.k.a Zip Code 34997 N RTY HUMAN RESOURCES Year-to-Date ▼	<ul> <li>be the purpose of soliciting contributions solicit contributions from such committee.</li> <li>Medco Health PAC)</li> <li>Date of Receipt</li> <li>M M / D D / Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y</li> <li>D f D / Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y Y Y Y Y</li> <li>D f D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y</li></ul>
EDCO HEALTH SOLUTIONS INC.	RD DR. State FL Occupation VP LIBEF	Zip Code 34997	Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 1 1 Transaction ID: INCA101359 Amount of Each Receipt this Period
HN STAINES iling Address 4442 SE WATERFOF / UART C ID number of contributing eral political committee. me of Employer DCO HEALTH SOLUTIONS ceipt For: Primary General Other (specify) ▼	State FL C Occupation VP LIBER	34997 N RTY HUMAN RESOURCES Year-to-Date ▼	M M / D D / Y Y Y Y 0 6 1 1 2 0 1 1 Transaction ID: INCA101359 Amount of Each Receipt this Period
CID number of contributing eral political committee. me of Employer DCO HEALTH SOLUTIONS ceipt For: Primary General Other (specify) ▼	State FL C Occupation VP LIBER	34997 N RTY HUMAN RESOURCES Year-to-Date ▼	0 6       1 1       2 0 1 1         Transaction ID: INCA101359         Amount of Each Receipt this Period
C ID number of contributing eral political committee. me of Employer EDCO HEALTH SOLUTIONS ceipt For: Primary General Other (specify)	FL C Occupation VP LIBER	34997 N RTY HUMAN RESOURCES Year-to-Date ▼	Amount of Each Receipt this Period
C ID number of contributing eral political committee. me of Employer EDCO HEALTH SOLUTIONS ceipt For: Primary General Other (specify)	C Occupation VP LIBER	n RTY HUMAN RESOURCES Year-to-Date	
eral political committee. me of Employer DCO HEALTH SOLUTIONS ceipt For: Primary General Other (specify) $\checkmark$	Occupation VP LIBE	RTY HUMAN RESOURCES Year-to-Date	50.00
ceipt For: Primary General Other (specify) ▼	VP LIBEF	RTY HUMAN RESOURCES Year-to-Date	
Primary General Other (specify) ▼	Aggregate		1
Other (specify)	0 0	650.00	
Name (Last, First, Middle Initial)	1	0 0 0 0 0 0 0	]
			Date of Receipt
iling Address 8362 GOLDEN PRAIF	RIE DRIVE		M M / D D / Y Y Y Y 06 11 2011
	State	Zip Code	Transaction ID: INCA100930
	<u> </u>	33647	Amount of Each Receipt this Period
	C		25.00
me of Employer DCO HEALTH SOLUTIONS	Occupation VP/GM	1	
ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	]
	<u> </u>		Date of Receipt
iling Address 10302 S FEDERAL H PO BOX 266	WY		M M / D D / Y Y Y Y 06 / 11 / 2011
	State FI	Zip Code 34952	Transaction ID: INCA101039 Amount of Each Receipt this Period
C ID number of contributing	C		50.00
me of Employer DCO HEALTH SOLUTIONS			
ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
<b>OTAL</b> of Receipts This Page (optional) .		·····	125.00
	y MPA C ID number of contributing eral political committee. me of Employer EDCO HEALTH SOLUTIONS ceipt For: Primary General Other (specify) ▼ I Name (Last, First, Middle Initial) 1 TIDD I Name (	A TIMOTHY SWETT         illing Address       8362 GOLDEN PRAIRIE DRIVE         y       State         y       State         MPA       FL         C ID number of contributing eral political committee.       C         me of Employer EDCO HEALTH SOLUTIONS       Occupation VP/GM         ceipt For:       Aggregate         Primary       General         Other (specify)       Aggregate         I Name (Last, First, Middle Initial)       10302 S FEDERAL HWY PO BOX 266         Y       State         PT ST LUCIE       FL         C ID number of contributing eral political committee.       Occupation VP/GM F         DCO HEALTH SOLUTIONS       Occupation VP/GM F         DCO HEALTH SOLUTIONS       VP/GM F         C ID number of contributing eral political committee.       C         me of Employer EDCO HEALTH SOLUTIONS       Occupation VP/GM F         Ceipt For:       Aggregate         Primary       General         Other (specify)       Aggregate         Primary       General         Other (specify)       Aggregate	IMOTHY SWETT         illing Address       8362 GOLDEN PRAIRIE DRIVE         y       State       Zip Code         MPA       FL       33647         C ID number of contributing eral political committee.       C         me of Employer DDCO HEALTH SOLUTIONS       Occupation VP/GM         Primary       General         Other (specify)          I Name (Last, First, Middle Initial) ATIDD         IIIing Address       10302 S FEDERAL HWY PO BOX 266         y       State       Zip Code         PT       FL       34952         C ID number of contributing eral political committee.       C         me of Employer DCO HEALTH SOLUTIONS       Occupation VP/GM PATIENT SVCS         c ID number of contributing eral political committee.       C         me of Employer DCO HEALTH SOLUTIONS       Occupation VP/GM PATIENT SVCS         ceipt For:       Aggregate Year-to-Date         Primary       General       Occupation VP/GM PATIENT SVCS

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 205 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	Medco Health PAC)	
∠ A.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE	Date of Receipt	
	Mailing Address 5 APPLE ORCHARD F	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA101064
	MOORESTOWN	NJ 08057	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
	Receipt For:	Aggregate Year-to-Date V	
	Primary     General       Other (specify) ▼	1300.00	
- В.	Full Name (Last, First, Middle Initial) DENISE WEISS		Date of Receipt
	Mailing Address 1590 SW PROSPERI	M M / D D / Y Y Y Y 06 11 2011	
	City	State Zip Code	Transaction ID: INCA101413
	PALM CITY	FL 34990	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR QUALITY & TRAINING	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 325.00	
– C.	Full Name (Last, First, Middle Initial) GRETA WELEBOB		Date of Receipt
0.	Mailing Address 2044 NW CHENILLE I	M M / D D / Y Y Y Y 06 11 2011	
	City	State Zip Code	Transaction ID: INCA101414
	STUART	FL 34994	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MARKETING	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
ſ	SUBTOTAL of Receipts This Page (optional)	·	100.00
F	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 206 / 434
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	erson for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PC	OLITICAL	ACTION COMMITTEE (a.	k.a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER WOODYARD	Date of Receipt		
	Mailing Address 538 RAVEN CIRCLE	0 6 / D D / Y Y Y Y 0 1 1 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101078
	BROWNSBURG	IN	46112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS			
	Receipt For:	_	CHNOLOGY re Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00	•
		0 0	0 0 0 0 0 0	•
В.	Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI			Date of Receipt
	Mailing Address 6691 DEERVIEW DRIV	0 6 1 1 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100969
	LOVELAND	OH	45140	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	650.00	
C.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 7571 163 RD COURT N	l.		0 6 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101420
	PALM BEACH GARDENS	FL	33418	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)			62.50
	TOTAL This Dariad (last page this line number a	nlu)		
	<b>TOTAL</b> This Period (last page this line number of	····y) ······		r

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 207 / 434         (check only one)       11a         X       11a       11b         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	ay not be sold or used by any pers Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)	Date of Receipt		
	Mailing Address 57 SYCAMORE DRIVE			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100911
	WALDWICK	NJ	07463	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FOR	on RMULARY & COVERAGE M	— GMT
			e Year-to-Date 🔻	
	Other (specify)	0 0	325.00	]
в.	Full Name (Last, First, Middle Initial) MS LUCILLE ACCETTA			Date of Receipt
	Mailing Address 11 ANDOVER CT			M         M         /         D         D         Y
	City State		Zip Code	Transaction ID: INCA100923
		NY	10567	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		IICAL SVCS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	325.00	
C.	Full Name (Last, First, Middle Initial) MS LESLIE ACHTER			Date of Receipt
	Mailing Address 821 ALBEMARLE STR	EET		M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100898
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	LYTICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	650.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number of	only)		

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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 208 / 434				
	ITEMIZED RECEIPTS		for each category of the	(check only one)				
			Detailed Summary Page	X 11a 11b 11c 12				
	[	13 14 15 16 17						
	Any information copied from such Reports and S	Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions				
	or for commercial purposes, other than using the	e name and add	fress of any political committee to	solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
	MEDCO HEALTH SOLUTIONS INC. F	angle MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N						
	/							
	Full Name (Last, First, Middle Initial)							
Α.	MR EDWARD ADAMCIK	Date of Receipt						
	Mailing Address 1021 SUNSET RIDGE	0 6 1 8 2 0 1 1						
	0.11	01-1-1	7. 0. 1.					
	City	State	Zip Code	Transaction ID: INCA100804				
	BRIDGEWATER	NJ	08807	Amount of Each Receipt this Period				
	FEC ID number of contributing	С		50.00				
	federal political committee.			00.00				
	Name of Freelower	Occurrentier		_				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		THIC				
		1 · · · · · · · · · · · · · · · · · · ·	RM CONTRACT & CONSUL					
	Receipt For:	Aggregate	Year-to-Date					
	Primary General		650.00					
	Other (specify)	1						
-	Full Name (Last, First, Middle Initial)			Data of Descript				
В.	DIANE ADAMS			Date of Receipt				
	Mailing Address 34 THOMAS ST.			0 6 1 8 2 0 1 1				
	City	State	Zip Code					
	•			Transaction ID: INCA101279				
	CALDWELL	NJ	07006	Amount of Each Receipt this Period				
	FEC ID number of contributing			25.00				
	federal political committee.							
	Name of Employer	Occupation	1	-				
	Name of Employer MEDCO HEALTH SOLUTIONS		BUSINESS REQUIREMENT	s				
	Receipt For:	1 1	Year-to-Date V	<u> </u>				
	Primary General	Aggregate		1				
	Other (specify)		325.00					
				1				
	Full Name (Last, First, Middle Initial)	1		+				
C.	MR STEPHEN ADLER			Date of Receipt				
	Mailing Address 139 BELLVALE LAKES	S BD		M M / D D / Y Y Y Y				
		0.12		06 18 2011				
	City	State	Zip Code	Transaction ID: INCA100896				
	WARWICK	NY	10990	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		50.00				
	·							
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation						
		VP INFO	TECHNOLOGY					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General		650.00	1				
	Other (specify) <b>v</b>	0.0						
	SUBTOTAL of Receipts This Page (optional)			125.00				
				-				
	TOTAL This Period (last page this line number	only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 209 / 434         (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	Medco Health PAC)	
لا A.	, Full Name (Last, First, Middle Initial) MS KELLY AGNEW	Date of Receipt	
	Mailing Address 77 W. HURON STREE #2209	ΞT	06 / <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>A</sup> <sup>Y</sup>
	City	State Zip Code	Transaction ID: INCA100818
	CHICAGO FEC ID number of contributing federal political committee.	IL 60654	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- В.	Full Name (Last, First, Middle Initial) MS MICHELE AGNEW Mailing Address 2433 ANDERSON PA	IRK DRIVE	Date of Receipt
		06 18 2011	
	City HENDERSON	State Zip Code NV 89044	Transaction ID: INCA100793 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- C.	Full Name (Last, First, Middle Initial) MR JOHN AHLER		Date of Receipt
	Mailing Address 2677 SKELTON LANE		0 6 1 8 2 0 1 1
		State Zip Code	Transaction ID: INCA101261
	BLACKLICK, FEC ID number of contributing federal political committee.	OH 43004	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
ſ	SUBTOTAL of Receipts This Page (optional)	· ·····	50.00
ľ	TOTAL This Period (last page this line number	only)	

				FOR LINE NUMBER: PAGE 210 / 434			
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	(check only one)			
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
	Any information copied from such Reports and S	13     14     15     16     17       on for the purpose of soliciting contributions					
	or for commercial purposes, other than using the	name and ad	dress of any political committee to	o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P			Modeo Health BAC			
	WIEDOUTIEAETH SOLUTIONS INC. P						
Α.	Full Name (Last, First, Middle Initial) JANET ALEXANDER						
	Mailing Address 32 WEST 83RD STRE	Date of Receipt					
	APT #2 City	State	Zip Code	Transaction ID: INCA101334			
	NEW YORK	NY	10024	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio					
	Receipt For:	, I	CCT EXEC e Year-to-Date <b>V</b>	_			
	Primary General	Aggregate		1			
	Other (specify) ▼		325.00				
в.	Full Name (Last, First, Middle Initial) DR JODY ALLEN			Date of Receipt			
-	Mailing Address 3031 MOUNT HILL DF	0 6 1 8 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA100895			
	MIDLOTHIAN	VA	23113	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio CHIEF C	on CLINICAL OFFICER				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼		650.00	1			
C.	Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO	•		Date of Receipt			
	Mailing Address 19 ROSS ROAD			0 6 1 8 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100980			
	SCARSDALE	NY	10583	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INFC	on ) TECHNOLOGY				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_			
	Other (specify) ▼	8 0	650.00				
	SUBTOTAL of Receipts This Page (optional)		······	125.00			
	TOTAL This Period (last page this line number	only)	1				
		····	·····				

				FOR LINE NUMBER: PAGE 211 / 434
	SCHEDULE A (FEC Form 3X)			(check only one)
	TEMIZED RECEIPTS			X 11a 11b 11c 12
Г	A	13 14 15 16 17		
	Any information copied from such Reports and Si or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) TEJWANSH ANAND	Date of Receipt		
	Mailing Address 10 WHIPPOORWILL L	0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101236
	CHAPPAQUA	NY	10514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ) TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)     ▼	0 0	650.00	]
- B.	Full Name (Last, First, Middle Initial) MR EVAN ANDRICOPOULOS			Date of Receipt
	Mailing Address 216 ARROWOOD WA	M M / D D / Y Y Y Y 06 18 2011		
	City	State	Zip Code	Transaction ID: INCA101049
	BASKING RIDGE	NJ	07920	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on BUSINESS REQUIREMENTS	S
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)     ▼	0 0	325.00	
- C.	Full Name (Last, First, Middle Initial) MRS LAUREN ANTONELLI			Date of Receipt
	Mailing Address 64 CUPSAW DRIVE			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101004
	RINGWOOD	NJ	07456	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on DDUCT MGMT	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
ſ	SUBTOTAL of Receipts This Page (optional)			100.00
┢			•	
	TOTAL This Period (last page this line number of	oniy)	P	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 212 / 434         (check only one)       11a         X       11a       11b       11c       12         I3       14       15       16       17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
A.	Full Name (Last, First, Middle Initial) MS JAYME ANTONOPLOS	Date of Receipt					
	Mailing Address 48 WITTE ROAD	0 6 1 8 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA101081			
	HEWITT	NJ	07421	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR EXE	n EC CORR				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	325.00				
в.	Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI			Date of Receipt			
	Mailing Address 190 WINDSOR PLACE	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA101010			
	MADISON	NJ	07940	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	1	OUNSEL				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-			
	Other (specify) ▼	0 0	325.00				
с.	Full Name (Last, First, Middle Initial) DENNIS AUCH			Date of Receipt			
	Mailing Address 1981 E. COVEY VIEW	COURT		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA101385			
	SALT LAKE CITY	UT	84106	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer ACCREDO HEALTH GROUP	- I	IBURSEMENT				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-			
	Other (specify) ▼	0 0	650.00				
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 213 / 434         (check only one)       11a         X       11a       11b         13       14       15       16       17			
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	ly not be sold or used by any persideress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. P	angle MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
A.	Full Name (Last, First, Middle Initial) WILLIAM AX	Date of Receipt					
	Mailing Address 1607 STODDARD ST			M M / D D / Y Y Y Y 06 18 2011			
	City	State	Zip Code	Transaction ID: INCA101395			
	ROCKFORD	IL	61108	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer ACCREDO HEALTH GROUP	Occupation	on LES-HEMOPHILIA				
	Receipt For:	1					
	Primary General Other (specify) ▼	0 0	325.00	]			
В.	Full Name (Last, First, Middle Initial) MS CHARLOTTE BABCOCK			Date of Receipt			
	Mailing Address 2636 SHAKER RD			M + M         /         D + D         /         Y + Y + Y         Y           0 6         1 8         2 0 1 1			
	City State		Zip Code	Transaction ID: INCA101365			
	CLEVELAND HEIGHTS	OH	44118	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on CCT EXEC				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_			
	Other (specify) ▼	0 0	325.00				
C.	Full Name (Last, First, Middle Initial) MS BECKIE BARATKO			Date of Receipt			
	Mailing Address 80 N. WOODLAND ST	REET		M M / D D / Y Y Y Y 06 18 2011			
	City	State	Zip Code	Transaction ID: INCA101161			
	ENGLEWOOD	NJ	07631	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	-	POSAL UNIT				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_			
	Other (specify) ▼	0 0	650.00				
	SUBTOTAL of Receipts This Page (optional)			100.00			
	TOTAL This Period (last page this line number of	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 214 / 434           (check only one)
	Any information copied from such Reports and St or for commercial purposes, other than using the	13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee.	
		OLITICAL ACTION COMMITTEE (a.k.a.	
Α.	Full Name (Last, First, Middle Initial) MR THOMAS BARATTA	Date of Receipt	
	Mailing Address 69 SKYLINE DR	06 18 YYYY 2011	
		State Zip Code	Transaction ID: INCA101088
	UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	NJ 07458	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
В.	Full Name (Last, First, Middle Initial) MR THOMAS BARDZELL Mailing Address 77 HIGHLAND AVE		Date of Receipt
		06 18 2011	
	City MIDLAND PARK	State Zip Code NJ 07432	Transaction ID: INCA101211 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
C.	Full Name (Last, First, Middle Initial) JANE BARLOW		Date of Receipt
	Mailing Address 3 AVALON COURT		0 6 / D D / Y Y Y Y 0 6 / 1 8 2 0 1 1
		State Zip Code	Transaction ID: INCA101323
	HOPEWELL JUNCTION FEC ID number of contributing federal political committee.	NY 12533	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MEDICAL POLICIES	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)	······	125.00
	TOTAL This Period (last page this line number of	only)	

				FOR LINE NUMBER: PAGE 215/434
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
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	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any pers dress of any political committee to	on tor the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR MICHAEL BARONE	Date of Receipt		
	Mailing Address 452 MEDWAY ROAD			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101366
	HIGHLAND HEIGHTS	OH	44143	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		_
	Receipt For:			_
	Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	2496.00	
в.	Full Name (Last, First, Middle Initial) MR DAVID BAUGH			Date of Receipt
	Mailing Address 1813 ADONIS AVE			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101219
	HENDERSON	NV	89074	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		58.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MGR BE	n NEFIT DELIVERY SYSTEM	IS
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	754.00	
с.	Full Name (Last, First, Middle Initial) JAMES BECKER			Date of Receipt
-	Mailing Address 35 BIRCH STREET			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101227
	EMERSON	NJ	07630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ENT	n ERPRISE BUSINESS INTE	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)			275.00
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	TOTAL This Period (last page this line number of	only)		•

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 216/434		
			Use separate schedule(s) for each category of the	(check only one)		
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$		
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	on for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)					
	> MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR DONALD BELFER	Date of Receipt				
	Mailing Address 1270A VALLEY ROAD	0 6 / <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>				
	City	State	Zip Code	Transaction ID: INCA101316		
	WAYNE	NJ	07470	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	m BUSINESS ANALYSIS			
	Receipt For:	Aggregate	e Year-to-Date 🔻	_		
	Primary General Other (specify) ▼		325.00			
	Full Name (Last, First, Middle Initial)					
В.	MR STEPHEN BELL Mailing Address 24 GLENWOOD ROAD	Date of Receipt				
	City	State	Zip Code	Transaction ID: INCA101238		
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA				
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary     General       Other (specify) ▼	0 0	650.00	]		
C.	Full Name (Last, First, Middle Initial) MS FRANCINE BELLOFATTO			Date of Receipt		
		Mailing Address 2981 NORTHWEST BLVD				
	City	State	Zip Code	Transaction ID: INCA100935		
		ОН	43221	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n CLINICAL SVCS			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼	0 0	325.00			
	I SUBTOTAL of Receipts This Page (optional)			100.00		
				-		
	TOTAL This Period (last page this line number of	only)				
	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 217 / 434           (check only one)         11c         12           X         11a         11b         11c         12           12         14         15         16         17			
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	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)			
A.	Full Name (Last, First, Middle Initial) MS THERESA BENSHOOF	Date of Receipt				
	Mailing Address 1332 SE 78TH ST		06 / 18 / Y Y Y Y 2011			
		State Zip Code	Transaction ID: INCA100944			
	RUNNELLS FEC ID number of contributing federal political committee.	IA 50237	Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	-			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00				
В.	Full Name (Last, First, Middle Initial) MR JEFFREY BENYACAR Mailing Address 300 MAIN ST UNIT 11	4	Date of Receipt			
	BLDG E	06 18 2011				
	City LITTLE FALLS	State Zip Code NJ 07424	Transaction ID: INCA101059 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR BIAC				
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date 650.00				
С.	Full Name (Last, First, Middle Initial) MS MARYBETH BERENGUER		Date of Receipt			
	Mailing Address 2 WEXLER CT		06 / D D / Y Y Y Y 02011			
	City	State Zip Code	Transaction ID: INCA101103			
	GARNERVILLE FEC ID number of contributing federal political committee.	NY 10923	Amount of Each Receipt this Period 25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL PRODUCT MGMT	-			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00				
	SUBTOTAL of Receipts This Page (optional)	·····	100.00			
	TOTAL This Period (last page this line number	only)				

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 218 / 434
	· · · ·	Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	MEDCO HEALTH SOLUTIONS INC. P		a Medeo Health PAC)
	/		
Α.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address P O BOX 1373		M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA101150
	MEDICAL LAKE	WA 99022	Amount of Each Receipt this Period
	FEC ID number of contributing	<b>C</b>	12.50
	federal political committee.		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General		
	Other (specify) <b>v</b>	325.00	
В.	Full Name (Last, First, Middle Initial) JEAN BERGWALL		Date of Receipt
	Mailing Address 2546 HOLLYHOCK CO	VE	M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA101407
	GERMANTOWN	TN 38138	Amount of Each Receipt this Period
	FEC ID number of contributing	C	25.00
	federal political committee.		
	Name of Employer ACCREDO HEALTH GROUP	Occupation	-
	ACCREDO HEALTH GROUP	DIR PRODUCT LINE II	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General	225.00	
	Other (specify) 🔻	325.00	
С.	Full Name (Last, First, Middle Initial) MS STACEY BERNSTEIN		Date of Receipt
0.	Mailing Address 166 BERKELEY PLACE		
	Maining Address 100 BERKEELT FEAGE	-	06 18 2011
	City	State Zip Code	Transaction ID: INCA101295
	GLEN ROCK	NJ 07452	Amount of Each Receipt this Period
	FEC ID number of contributing		
	federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL	
	Receipt For:		
	Primary General	Aggregate Year-to-Date 🔻	_
	Other (specify)	325.00	
	SUBTOTAL of Receipts This Page (optional)		62.50
	· · · · · · · · · · · · · · · · · · ·		
	TOTAL This Period (last page this line number of	nly)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 219 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER BERRY	Date of Receipt		
	Mailing Address 37-19 VICTORIA RD			0 6 / D D / Y Y Y Y 0 1 8 / 2 0 1 1
	City FAIR LAWN	State	Zip Code	Transaction ID: INCA100918
	FEC ID number of contributing federal political committee.	NJ C	07410	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n CHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	1
в.	Full Name (Last, First, Middle Initial) MR DAVID BERRY			Date of Receipt
	Mailing Address 11 COBBLESTONE LA	NE		0 6 / D D / Y Y Y Y 0 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101087
	RAMSEY FEC ID number of contributing federal political committee.	NJ C	07446	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	-	HNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
C.	Full Name (Last, First, Middle Initial) INDERPAL BHANDARI			Date of Receipt
	Mailing Address 220 ARDSLEY ROAD			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101304
	SCARSDALE FEC ID number of contributing federal political committee.	C	10583	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
	SUBTOTAL of Receipts This Page (optional)		······	100.00
	TOTAL This Period (last page this line number c	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 220 / 434           (check only one)         11a           X         11a           13         14           15         16           17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	r not be sold or used by any persol lress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS EILEEN BIDELL	Date of Receipt		
	Mailing Address 71 WASHINGTON CT.			M         M         /         D         D         /         Y
	City TOWACO	State NJ	Zip Code 07082	Transaction ID: INCA101083
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	PHARM OPS	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	]
в.	Full Name (Last, First, Middle Initial) MR ANDREW BIDINOTTO Mailing Address 7728 GRACE DRIVE			Date of Receipt
				06 18 2011
	City NORTH RICHLAND HIL	State TX	Zip Code 76182	Transaction ID: INCA100828 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	r •	S PROCESS CHAMPION	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 325.00	]
С.	Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS			Date of Receipt
	Mailing Address 4273 BROGDAN FARM	M COURT		M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101096
	BUFORD FEC ID number of contributing federal political committee.	GA	30518	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	AL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			62.50
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 221 / 434         (check only one)       110         X       11a       11b         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements ma	ay not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO			Date of Receipt
	Mailing Address 26 DAYLILY DRIVE			06 18 2011
	City	State	Zip Code	Transaction ID: INCA101292
	MOUNT LAUREL	NJ	08054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP HR	on	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	650.00	
в.	Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN			Date of Receipt
	Mailing Address 4520 LINWOOD LANE			M         M         /         D         D         Y
	City State		Zip Code	Transaction ID: INCA101218
	DEEPHAVEN	MN	55331	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		IENT & MKT STRATEGIC D	EV
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-
	Other (specify) ▼	0 0	650.00	]
C.	Full Name (Last, First, Middle Initial) MS JESSICA BLANTON			Date of Receipt
	Mailing Address 410 CORNELIA ST. #4	ŀ		M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100946
	BOONTON	NJ	07005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRO	on OPOSAL DEPARTMENT	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number	only)		

9	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 222 / 434				
			Use separate schedule(s) for each category of the	(check only one)				
I			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$				
	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.							
	MEDCO HEALTH SOLUTIONS INC. PO	. Medco Health PAC)						
Α.	Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN			Date of Receipt				
	Mailing Address 50 NEW ENGLAND DR	06 18 Y Y Y 2011						
	City	State	Zip Code	Transaction ID: INCA101047				
	RAMSEY	NJ	07446	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MKT	n ING & PRODUCT DEV					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	650.00					
- В.	Full Name (Last, First, Middle Initial) JAMES BLONDIN			Date of Receipt				
	Mailing Address 115 AUBURN MEADOV	0 6 1 8 2 0 1 1						
	City	State	Zip Code	Transaction ID: INCA101393				
	FORISTELL	MO	63348	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer ACCREDO HEALTH GROUP	Occupatio	n AL MGR - MULTI BRANCH	-				
	Receipt For:	-	e Year-to-Date V	-				
	Primary General Other (specify) ▼		325.00	]				
- c.	Full Name (Last, First, Middle Initial) MR STEVEN BLOOM			Date of Receipt				
0.	Mailing Address 17818 ARBOR GREEN	E DR		0 6 1 8 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA101046				
	ТАМРА	FL	33647	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FIEL						
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>		650.00					
ſ	SUBTOTAL of Receipts This Page (optional)		b	125.00				
F	TOTAL This Period (last page this line number o		•					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 223 / 434 (check only one) X 11a 11b 11c 12
	Any information copied from such Reports and Statements ma		sold or used by any perso	n for the purpose of soliciting contributions
	or for commercial purposes, other than using the n	ame and address of	any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL ACTION	N COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) KEN BODMER	Date of Receipt		
	Mailing Address P.O. BOX 381947			0 6 / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1
	City		Code	Transaction ID: INCA101125
	GERMANTOWN	<u>TN 38</u>	183	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation COO/SVP BUS	TRANSFORMATION	
	Receipt For: Aggregate		-Date 🔻	
	Other (specify) ▼		2496.00	
в.	Full Name (Last, First, Middle Initial) MR MICHAEL BOGDA			Date of Receipt
	Mailing Address 80 LEONA CT			M         M         /         D         D         /         Y
	City	•	Code	Transaction ID: INCA101221
	LEVITTOWN	NY 11.	756	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHN		
	Receipt For: Primary General	Aggregate Year-to-	-Date 🔻	
	Other (specify) ▼	0 0 0 0	325.00	
C.	Full Name (Last, First, Middle Initial) MRS HEATHER BONOME			Date of Receipt
	Mailing Address 203 12TH STREET NE			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City		Code	Transaction ID: INCA100982
	WASHINGTON	DC 200	002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL S		_
	Receipt For: Primary General	Aggregate Year-to-	-Date 🔻	
	Other (specify) ▼		325.00	
	SUBTOTAL of Receipts This Page (optional)		•••••••••••••••••••••••••••••••••••••••	242.00
	TOTAL This Period (last page this line number of	nly)		

	SCHEDULE A (FEC Form 3X)		Lies second	abadula(c)	FOR LINE NUMBER: PAGE 224 / 434
	ITEMIZED RECEIPTS		Use separates		(check only one)
	II EMIZED RECEIPIS		Detailed Sumr		X 11a 🗌 11b 🗌 11c 🗌 12 🔄
				.,	13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements maname and ad	ay not be sold or us ddress of any politic	ed by any perso al committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)				
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMM	IITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA				Date of Receipt
	Mailing Address 109 ARBOR PL				0 6 / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1
	City	State	Zip Code		Transaction ID: INCA100865
	BRYN MAWR	PA	19010		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SAL			
	Receipt For:		te Year-to-Date 🔻		1
	Primary General	, iggi ogut			1
	Other (specify)	0 0	0 0 0 0	650.00	
В.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX				Date of Receipt
	Mailing Address 6527 SHORBURGH DF	RIVE			M · M         /         D · D         Y         Y · Y         <
	City	State	Zip Code		Transaction ID: INCA100776
	INDIANAPOLIS	IN	46278		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on ARM PRACTICE		
	Receipt For:	Aggregat	te Year-to-Date 🔻		
	Primary General			050.00	1
	Other (specify) <b>v</b>		0 0 0 0	650.00	
C.	Full Name (Last, First, Middle Initial) RUSS BOURNE				Date of Receipt
	Mailing Address 1241 MAGNOLIA ST.				M         M         /         D         D         /         Y
	City	State	Zip Code		Transaction ID: INCA101406
	TUNICA	MS	38676		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUS			
	Receipt For:	Aggregat	te Year-to-Date 🔻		7
	Primary General Other (specify) ▼		0 0 0 0	625.00	]
	SUBTOTAL of Receipts This Page (optional)				125.00
	TOTAL This Period (last page this line number of				
		····, ·····			

A.	information copied from such Reports and or commercial purposes, other than using to NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Full Name (Last, First, Middle Initial) MS SALLE BOWDEN Mailing Address 5259 FISHERCRES <sup>®</sup> City RICHMOND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	he name and add . POLITICAL A T LN State VA C Occupation VP FORM	ACTION COMMITTEE (a.k.a. Zip Code 23231	solicit contributions from such committee.
<b>A.</b>	MEDCO HEALTH SOLUTIONS INC. Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN Mailing Address 5259 FISHERCRES City RICHMOND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	T LN State VA C Occupation VP FORM	Zip Code 23231	Date of Receipt M M / D D / Y Y Y Y 0 6 / 18 / 2011 Transaction ID: INCA101169 Amount of Each Receipt this Period
<b>A.</b>	MS SALLIE BOWDEN Mailing Address 5259 FISHERCRES City RICHMOND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	State VA C Occupation VP FORM	23231	M M / D D / Y Y Y Y 0 6 18 2011 Transaction ID: INCA101169 Amount of Each Receipt this Period
-	City RICHMOND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	State VA C Occupation VP FORM	23231	0 6       1 8       2 0 1 1         Transaction ID: INCA101169         Amount of Each Receipt this Period
-	RICHMOND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	VA C Occupation VP FORM	23231	Amount of Each Receipt this Period
1	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	C Occupation VP FOR	n MULARY CONSULTING Year-to-Date V	
1	federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Occupation VP FORM	MULARY CONSULTING Year-to-Date V	200.00
	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	VP FOR	MULARY CONSULTING Year-to-Date V	
	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate		
	Uther (specify) ▼ Full Name (Last, First, Middle Initial)	0 0	2600.00	
	· · · · · · · · · · · · · · · · · · ·			
				Date of Receipt
I	Mailing Address 15 DAWN LANE			0 6 / D D / Y Y Y Y 0 6 / 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101215
-	RINGWOOD	NJ	07456	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
Ī	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R STRAT PRODUCT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
	Full Name (Last, First, Middle Initial) MR KEITH BRADBURY			Date of Receipt
-	Mailing Address 122 DERFUSS LN			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100836
•	BLAUVELT	NY	10913	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R DRUG INFO	
ļ	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
su	BTOTAL of Receipts This Page (optional)		<b>&gt;</b>	275.00

SCH	EDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 226 / 434			
ITEM	IZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17			
Any info	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.						
	IE OF COMMITTEE (In Full) DCO HEALTH SOLUTIONS INC. PC						
	Name (Last, First, Middle Initial) PATRICIA BRANUM	Date of Receipt					
Maili	ng Address 210 FROG HOLLOW RC	M M / D D / Y Y Y Y 06 18 2011					
City		State	Zip Code	Transaction ID: INCA101151			
	ATESVILLE	PA	19320	Amount of Each Receipt this Period			
	ID number of contributing ral political committee.	С		85.00			
	e of Employer DCO HEALTH SOLUTIONS	Occupatio	n & PROCESS ENGINEERIN	G			
Rece	eipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify)		1105.00				
	Name (Last, First, Middle Initial) JOHN BRENNAN			Date of Receipt			
	ng Address 2 CARMEN LANE						
City		State	Zip Code	Transaction ID: INCA101263			
		NJ	08822	Amount of Each Receipt this Period			
	ID number of contributing ral political committee.	C		50.00			
Nam MEI	e of Employer DCO HEALTH SOLUTIONS	Occupatio VP AUD					
Rece	eipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify) <b>v</b>	0 0	650.00				
	Name (Last, First, Middle Initial) PAUL BRESSI			Date of Receipt			
Maili	ng Address 45 ALDER DR			0 6 1 8 2 0 1 1			
City		State	Zip Code	Transaction ID: INCA100948			
	MSEY	NJ	07446	Amount of Each Receipt this Period			
	ID number of contributing ral political committee.	C		25.00			
Nam MEI	e of Employer DCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY				
Rece	eipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify) <b>v</b>		325.00				
SUBT	DTAL of Receipts This Page (optional)			160.00			
	This Period (last page this line number or						

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 227 / 434 (check only one)			
	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12			
Г							
	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)			
A.	Full Name (Last, First, Middle Initial) MR JAMES BREWER, III	Date of Receipt					
	Mailing Address 1865 BROADHAVEN D	0 6 1 8 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA101007			
	MIDDLEBURG	FL	32068	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	n L ACCT EXEC				
	Receipt For:	-	e Year-to-Date V	_			
	Primary General		650.00	1			
	Other (specify)	0 0		]			
в.	Full Name (Last, First, Middle Initial) MS LINDA BRIDGE			Date of Receipt			
	Mailing Address 136 BEECH ST	M M / D D / Y Y Y Y 06 18 2011					
	City	State	Zip Code	Transaction ID: INCA100957			
	BELLEVILLE	NJ	07109	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	m MARKETING				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	0 0	325.00	]			
- C.	Full Name (Last, First, Middle Initial) MR PAUL BRISSON			Date of Receipt			
	Mailing Address 469 MANOR LANE			M M / D D / Y Y Y Y			
	City	State	Zip Code	0 6 1 8 2 0 1 1 Transaction ID: INCA100949			
	PELHAM MANOR	NY	10803	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	DDUCT DEVELOPMENT				
	Receipt For:	Aggregate	e Year-to-Date 🔻	_			
	Other (specify) ▼	0 0	325.00	]			
ſ	SUBTOTAL of Receipts This Page (optional)			100.00			
┝	SUBTUTAL OF RECEIPTS THIS Page (optional)						
	TOTAL This Period (last page this line number o	nly)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 228 / 434           (check only one)         11a           X         11a         11b           13         14         15         16
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO		ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR KENNETH BROWN	Date of Receipt		
	Mailing Address 540 GIORDANO DRIVE	=		0 6 1 8 Y Y Y Y Y 0 1 1 8 2 0 1 1
		State NY	Zip Code	Transaction ID: INCA100862
	YORKTOWN HEIGHTS FEC ID number of contributing federal political committee.	C	10598	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ENTE	n ERPRISE BUS INTELLIGEN	— ⊂€
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	]
в.	Full Name (Last, First, Middle Initial) STEVEN BROWN			Date of Receipt
	Mailing Address 140 S GROVE PARK	0 6 / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101388
	MEMPHIS FEC ID number of contributing federal political committee.	C	38117	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	-		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
C.	Full Name (Last, First, Middle Initial) TRISHA BROWN			Date of Receipt
	Mailing Address 10 MT. MCKINLEY CT.			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101422
	CLAYTON FEC ID number of contributing federal political committee.	CA	94517	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL PARTNER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number o	nly)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 229 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
∠ A.	Full Name (Last, First, Middle Initial) AMANDA BUNDY			Date of Receipt
	Mailing Address 5812 SEVEN POINTS	06 18 Y Y Y Y 2011		
	City	State	Zip Code	Transaction ID: INCA101383
	HERMITAGE FEC ID number of contributing federal political committee.		37076	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio	n 1BURSEMENT	
	Receipt For:	1	PERSEMENT Year-to-Date	-1
	Primary General Other (specify) ▼		650.00	]
- В.	Full Name (Last, First, Middle Initial) MR KEVIN BURON	I		Date of Receipt
	Mailing Address 25 TIMBERLAND			06 18 2011
	City	State	Zip Code	Transaction ID: INCA101017
	ALISO VIEJO	CA	92656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		SYSTEMED SALES	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]
- ).	Full Name (Last, First, Middle Initial) DANA BUTKUS			Date of Receipt
	Mailing Address 6 STERLING COURT			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101310
	WHIPPANY	NJ	07981	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 1	CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ♥ 325.00	]
	SUBTOTAL of Receipts This Page (optional)		••••••	125.00
F	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:     PAGE 230 / 434       (check only one)     11c     12
	Any information copied from such Reports and S or for commercial purposes, other than using the	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)	POLITICAL ACTION COMMITTEE (a.k.a.	
۷ A.	Full Name (Last, First, Middle Initial) MRS DOREEN CALDER	Date of Receipt	
	Mailing Address 441 S ELM STREET	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA100773
	MAYWOOD	NJ 07607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRODUCT DEVELOPMENT	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	520.00	
- В.	Full Name (Last, First, Middle Initial) MR FRANK CANNISTRARO		Date of Receipt
	Mailing Address 146 SEMINOLE AVE		0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100874
	NEW MILFORD	NJ 07646	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	325.00	
– c.	Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI		Date of Receipt
	Mailing Address 119 WASHINGTON A	/ENUE	0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101107
	CHATHAM	NJ 07928	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & CONTROLLER	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	2500.03	
ſ	SUBTOTAL of Receipts This Page (optional)	······	257.31
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 231 / 434         (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS MELISSA CARR Mailing Address 8 BRIARCLIFF TERR.			Date of Receipt
		AUL		06 18 2011
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INCA101045
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CHA	on NNEL & GENERIC MKTING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
- В.	Full Name (Last, First, Middle Initial) JOSEPH CASACCIA JR Mailing Address 9788 LIPSEY CV			Date of Receipt
	<u></u>	01-11-	7' - 0!-	06 18 2011
	City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INCA101086 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	1 1	ARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
- C.	Full Name (Last, First, Middle Initial) MR BARRY CESANEK			Date of Receipt
	Mailing Address 5 LEXINGTON CT			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101027
	SHAMONG FEC ID number of contributing federal political committee.	NJ C	08088	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PRO		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
ſ	SUBTOTAL of Receipts This Page (optional)			125.00
F	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 232 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR MARVEN CHIN	Date of Receipt	
	Mailing Address 1604 SNOWBERRY D	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA101270
	WILLIAMSTOWN	NJ 08094	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR QUALITY	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	325.00	
- B.	Full Name (Last, First, Middle Initial) HWEI-CHUNG CHOU		Date of Receipt
	Mailing Address 36 TANGLEWOOD HC	DLLOW	06 / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA101332
	UPPER SADDLE RIVER	NJ 07458	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- C.	Full Name (Last, First, Middle Initial) MR RAYMOND CHUNG		Date of Receipt
	Mailing Address 186 CROWN POINT R	D.	0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101277
	PARSIPPANY	NJ 07054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HLTH MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)	••••••••••••••••••••••••••••••••••••••	62.50
ľ	TOTAL This Period (last page this line number	only)	

l	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and S	Nation - to an	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 233 / 434           (check only one)         (check 112)           X         11a         11b         11c         12           13         14         15         16         17
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F Full Name (Last, First, Middle Initial) MRS MARLENE CLEMENT	e name and addi	ress of any political committee to	o solicit contributions from such committee.
	Mailing Address 42 MESQUITE VILLAC	GE CIR		0 6 1 8 2 0 1 1
	City HENDERSON	State NV	Zip Code 89012	Transaction ID: INCA100979 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation DIR CUST Aggregate		
_	Centeral Other (specify) ▼ Full Name (Last, First, Middle Initial)		325.00	
В.	Milling Address 2901 HIDDEN HILLS V	WAY		Date of Receipt
	City	State	Zip Code	Transaction ID: INCA101376
	CORONA FEC ID number of contributing federal political committee.	CA	92882	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	Occupation GENERAI	L MGR - MULTI BRANCH	1
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]
– C.	Full Name (Last, First, Middle Initial) MR JASON COLE	1		Date of Receipt
	Mailing Address 14917 E BELLA VISTA	A		M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1
	City VERADALE	State WA	Zip Code 99037	Transaction ID: INCA100995           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	]
Γ	SUBTOTAL of Receipts This Page (optional)	<u> </u>		62.50
	TOTAL This Period (last page this line number	only)		-

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 234 / 434         (check only one)
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS SUSAN COLUCCI	Date of Receipt		
	Mailing Address 703 SUCCASUNNA RE	M         M         /         D         D         /         Y		
	City LANDING	State NJ	Zip Code 07850	Transaction ID: INCA101288
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR HLT	n H MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
в.	Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE			Date of Receipt
	Mailing Address 130 WEST 67TH STREET, #4J			0 6 1 8 Y Y Y Y 2 0 1 1
	City NEW YORK	State NY	Zip Code 10023	Transaction ID: INCA101249
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	-	TECHNOLOGY	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 325.00	]
C.	Full Name (Last, First, Middle Initial) MR ROBERT COOK			Date of Receipt
	Mailing Address 270 S FRANKLIN TUR	NPIKE		M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100848
	RAMSEY FEC ID number of contributing federal political committee.	C	07446	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	- 1	HLTH CARE OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 235 / 434         (check only one)       11c         X       11a       11b         13       14       15       16       17				
	Any information copied from such Reports and S or for commercial purposes, other than using the	for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
∠ A.	Full Name (Last, First, Middle Initial) JEFFREY COOLE	Date of Receipt					
	Mailing Address 155 ASTON HALL DR	M         M         /         D         D         /         Y					
	City	State Zip Code	Transaction ID: INCA101382				
	EADS	TN 38028	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP TAX AND REGULATORY REPOR	- T				
	Receipt For:	Aggregate Year-to-Date 🔻					
	Primary     General       Other (specify) ▼	650.00					
- В.	Full Name (Last, First, Middle Initial) ANTONIO CORREIA		Date of Receipt				
	Mailing Address 19 WILLIAMS LANE		M M / D D / Y Y Y Y 06 18 2011				
	City	State Zip Code	Transaction ID: INCA101306				
	CHAPPAQUA	NY 10514	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS DEV					
	Receipt For: Primary General	Aggregate Year-to-Date ▼					
	Other (specify)	650.00					
- С.	Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN		Date of Receipt				
	Mailing Address 25 FAIRWAY TRAIL		M M / D D / Y Y Y Y 06 18 2011				
	City	State Zip Code	Transaction ID: INCA100981				
	<u>SPARTA</u>	NJ 07871	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		192.31				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHARMACY NETWORK MGMT					
	Receipt For: Primary General	Aggregate Year-to-Date ▼					
	Other (specify) ▼	2500.03					
ſ	SUBTOTAL of Receipts This Page (optional)	۱ 	292.31				
F	TOTAL This Period (last page this line number						

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for ea	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER:         PAGE 236 / 434           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	a. Medco Health PAC)		
∠ A.	Full Name (Last, First, Middle Initial) JONATHAN COX			Date of Receipt
	Mailing Address 9638 DOVE SPRING (	M         M         /         D         D         /         Y		
	City	State Zip	Code	Transaction ID: INCA101345
	GERMANTOWN	TN 381	39	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUS DEV		
	Receipt For:	Aggregate Year-to-	Date 🔻	
	Primary     General       Other (specify) ▼		325.00	]
в.	Full Name (Last, First, Middle Initial) MR ROBERT CRAIG			Date of Receipt
	Mailing Address 7979 E SANTA CATAL	0 6 / D D / Y Y Y Y 2 0 1 1		
	City	State Zip	Code	Transaction ID: INCA100962
	SCOTTSDALE	AZ 852	55	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR PROI	DUCT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 780.00	]
– C.	Full Name (Last, First, Middle Initial) MR DAVID CUNNOLD			Date of Receipt
	Mailing Address 5005 JONQUILLA DRI	VE		M M / D D / Y Y Y Y 06 18 2011
	City		Code	Transaction ID: INCA101303
	ALPHARETTA	GA 300	04	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACCT MGM		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			110.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 237 / 434         (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR ANGELO CUOZZO			Date of Receipt
	Mailing Address 19 IDA COURT			0 6 / D D / Y Y Y Y 0 6 / 1 8 2 0 1 1
		State	Zip Code	Transaction ID: INCA101035
	STATEN ISLAND FEC ID number of contributing federal political committee.	NY C	10312	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	on CHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
- B.	Full Name (Last, First, Middle Initial) MR AJAY DALAL			Date of Receipt
	Mailing Address 4603 NEWCASTLE DF	RIVE		06 18 2011
	City	State	Zip Code	Transaction ID: INCA101298
	FRISCO	TX	75034	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 · · · · · · · · · · · · · · · · · · ·	NICAL SVCS	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date 325.00	]
- C.	Full Name (Last, First, Middle Initial) MR JOHN DALY			Date of Receipt
	Mailing Address 46 BLUEBELL CT			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101135
	PARAMUS FEC ID number of contributing federal political committee.	NJ C	07652	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
ſ	SUBTOTAL of Receipts This Page (optional)		······	75.00
ľ	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC ITEMIZED RECEIPT	-	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 238 / 434 (check only one)
Andrewski i te		Detailed Summary Page	
Any information copied from suc or for commercial purposes, oth	ch Reports and Statements may er than using the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In MEDCO HEALTH SOLU	,	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middl MS ROSELIN DANIEL	e Initial)		Date of Receipt
Mailing Address 17 DEV	M M / D D / Y Y Y Y 06 18 2011		
City	State	Zip Code	Transaction ID: INCA101102
RANDOLPH FEC ID number of contributi	NJ	07869	Amount of Each Receipt this Period
federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIO	Occupatio EXEC DI	n R TECHNOLOGY	
Receipt For:	Aggregate	e Year-to-Date ▼	
Cher (specify) ▼	eral	325.00	]
Full Name (Last, First, Middl MS MARY DASCHNER	e Initial)		Date of Receipt
Mailing Address 2926 EV	VING AVE S		0 6 1 8 2 0 1 1
City	State	Zip Code	Transaction ID: INCA100943
MINNEAPOLIS	MN	55416	Amount of Each Receipt this Period
FEC ID number of contributi federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIO	ONS Occupatio	n PRES RETIREE SOLUTION	VS
Receipt For:	Aggregate	Year-to-Date V	
Primary     Gene       Other (specify) ▼	eral	2499.90	]
Full Name (Last, First, Middl MR ANDREW DAVIS	e Initial)		Date of Receipt
Mailing Address 3920 EX #313	CELSIOR BLVD.		0 6 1 8 2 0 1 1
City	State	Zip Code	Transaction ID: INCA100959
SAINT LOUIS PARK FEC ID number of contributi	MN	55416	Amount of Each Receipt this Period
federal political committee.	rig C		50.00
Name of Employer MEDCO HEALTH SOLUTIO	Occupatio VP MKTI	n NG & PRODUCT DEV	
Receipt For:		e Year-to-Date 🔻	
Other (specify)		650.00	]
SUBTOTAL of Receipts This F	Page (optional)	•	267.30
TOTAL This Period (last page	,		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 239 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may name and add	not be sold or used by any persent dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F			
A.	Full Name (Last, First, Middle Initial)     MR BARRY DAVIS	Date of Receipt		
	Mailing Address 11 WEISS DR			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101163
	TOWACO	NJ	07082	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
			Year-to-Date 🔻	_
	Other (specify) ▼		2496.00	
В.	Full Name (Last, First, Middle Initial) WARREN DAVIS			Date of Receipt
	Mailing Address 3131 SADDLEGAIT Co	OVE		M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: INCA101405
	GERMANTOWN	TN	38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	1 1	P STRAT BUS DEV	
	Receipt For: Primary General	Aggregate	Year-to-Date <b>V</b>	_
	Other (specify) ▼	0 0	600.00	
с.	Full Name (Last, First, Middle Initial) MR DANIEL DAVISON			Date of Receipt
	Mailing Address 18 BENTLEY DRIVE			06 / 0 0 / Y Y Y Y 0 0 1 8 2 0 1 1
		State	Zip Code	Transaction ID: INCA101122
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 1	ANCIAL PLANNING	
	Receipt For: Primary General	Aggregate	Year-to-Date <b>V</b>	_
	Other (specify) ▼	0 0	650.00	
	SUBTOTAL of Receipts This Page (optional)			292.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 240 / 434           (check only one)         X           X         11a         11b         11c         12
[	Any information copied from such Reports and Si	13 14 15 16 17	
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and address of any political committee to s	solicit contributions from such committee.
		OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
, А.	Full Name (Last, First, Middle Initial)	Date of Receipt	
	Mailing Address 12 0AKLAND DR	0 6 / D D / Y Y Y Y 0 6 / 1 8 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA101165
	MONTVALE	NJ 07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	55.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUSINESS REQUIREMENTS	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	715.00	
в.	Full Name (Last, First, Middle Initial) MS KATHLEEN DEFABIIS		Date of Receipt
	Mailing Address 104 HUDSON AVE		0 6 / D D / Y Y Y Y 0 6 18 2011
	City	State Zip Code	Transaction ID: INCA101201
	WALDWICK	NJ 07463	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIENT SVC DELIVERY	
	Receipt For: Primary General	Aggregate Year-to-Date	
	Other (specify) ▼	325.00	
с.	Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS		Date of Receipt
	Mailing Address N108 W7045 BERKSH	IRE STREET	0 6 / D D / Y Y Y Y 0 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101057
	CEDARBURG FEC ID number of contributing	WI 53012	Amount of Each Receipt this Period
	federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT	_
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) 🔻	325.00	
	SUBTOTAL of Receipts This Page (optional)	•	105.00
	TOTAL This Period (last page this line number of	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 241 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
A.	NAME OF COMMITTEE (In Full)	POLITICAL ACTION COMMITTEE (a.k.a.	
	Full Name (Last, First, Middle Initial) MR PAUL DELLO RUSSO	Date of Receipt	
	Mailing Address 80 HILLSIDE AVENUE		06 / D D / Y Y Y Y 06 / 18 / 2011
		State Zip Code	Transaction ID: INCA101012
	GLEN RIDGE FEC ID number of contributing federal political committee.	NJ 07028	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
в.	Full Name (Last, First, Middle Initial) MS TONI DEMANSS Mailing Address 32 RED BARN LANE		Date of Receipt
		06 18 2011	
	City WEST MILFORD	State Zip Code NJ 07480	Transaction ID: INCA101262 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE	_
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 325.00	
С.	Full Name (Last, First, Middle Initial) MS ANN-MARGARET DEMARCO		Date of Receipt
	Mailing Address 1 RUGBY ROAD		M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA100849
	CEDAR GROVE	NJ 07009	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	_
	Receipt For: Primary General Other (specify) $\blacksquare$	Aggregate Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)	······	75.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 242 / 434           (check only one)
	or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
∡ ٩.	Full Name (Last, First, Middle Initial) MS MAUREEN DEMPSEY		Date of Receipt
	Mailing Address 17 RICHWOOD PLAC	DE	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101282
	DENVILLE	NJ 07834	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MEDICARE COMPLIANCE	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	_
	Primary     General       Other (specify)	325.00	
-	Full Name (Last, First, Middle Initial) MR JAMES DENBY		Date of Receipt
	Mailing Address 78 SHERWOOD ST	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA100960
	<u>CLIFTON</u>	NJ 07013	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	]
-	Full Name (Last, First, Middle Initial) MR PATRICK DENNIS		Date of Receipt
	Mailing Address 2344 FRENCH ALPS	AVE.	M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA100905
	HENDERSON	NV 89044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 650.00	]
Γ			75.00

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 243 / 434
	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
ſ	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)		, p	
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR JOHN DERRICO	Date of Receipt		
	Mailing Address 195 HACKENSACK AV	ENUE		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA101229
	HARRINGTON PARK	NJ	07640	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n MARKETING	
	Receipt For:	-	e Year-to-Date V	-
	Primary General	riggrogati		
	Other (specify) <b>v</b>	0 0	325.00	
в.	Full Name (Last, First, Middle Initial) JUDITH DERRINGER			Date of Receipt
	Mailing Address 3306 SHALLOW COVE	M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         1 8         2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101391
	CRESTWOOD	KY	40014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation GENER/	n AL MGR - MULTI BRANCH	-
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	325.00	
- C.	Full Name (Last, First, Middle Initial) MS LAURA DEVEAU			Date of Receipt
-	Mailing Address 2289 BEDFORD ST AP	PT D2		0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101048
	STAMFORD	СТ	06905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n PRODUCT MGMT	_
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
ſ				75.00
╞	SUBTOTAL of Receipts This Page (optional)		•	
	TOTAL This Period (last page this line number o	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 244 / 434         (check only one)       X       11a       11b       11c       12         X       11a       11b       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements main name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
× .	Full Name (Last, First, Middle Initial) MS KAREN DEZEARN			Date of Receipt
	Mailing Address 4740 BRINKLEY LANE	ENE		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100813
	ATLANTA FEC ID number of contributing federal political committee.	GA	30342	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		_
	Receipt For: Primary General Other (specify)	_ <b>_</b> _	ACCT EXEC Year-to-Date  650.00	
- 3.	Full Name (Last, First, Middle Initial) MR FRANK DICALOGERO		0 0 0 0 0 0 0 0 0	Date of Receipt
	Mailing Address 36 ARTHUR STREET	0 6 1 8 2 0 1 1		
		State	Zip Code	Transaction ID: INCA100842
	RIDGEFIELD PARK FEC ID number of contributing federal political committee.	NJ C	07660	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FIN		
	Receipt For: Primary General Other (specify) ▼	Aggregate	P Year-to-Date ▼ 325.00	]
_	Full Name (Last, First, Middle Initial) MS TAMARA DIDYK	I		Date of Receipt
	Mailing Address 136 BEAVER RUN RD	)		06 18 2011
	City	State	Zip Code	Transaction ID: INCA101061
	LAFAYETTE	NJ	07848	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	1 1	ERPRISE OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]
Γ	SUBTOTAL of Receipts This Page (optional)			87.50

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Statements may r	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $245 / 434$ (check only one)(check only one)X11a11b1314151617
	NAME OF COMMITTEE (In Full)           MEDCO HEALTH SOLUTIONS INC. P	e name and addre	ess of any political committee to	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) MR BENJAMIN DIMARCO Mailing Address 4 ANN STREET			Date of Receipt
	City	State	Zip Code	Transaction ID: INCA100852
	VERONA	NJ	07044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHAR	RM AUDIT	
	Receipt For:       Primary       General       Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 455.00	
в.	Full Name (Last, First, Middle Initial) MS JUDITH DONNELLY			Date of Receipt
	Mailing Address 3 IRONWORKS ROAD	0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101198
	MONROE	NY	10950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINAN	-	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 325.00	]
C.	Full Name (Last, First, Middle Initial) MS LYNDA DOREMUS			Date of Receipt
	Mailing Address 16 E HOMESTEAD AV	/E		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA101030
	COLLINGSWOOD FEC ID number of contributing federal political committee.	C	08108	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHAR	RM PRACTICE	
	Receipt For: Primary General Other (specify) $\blacksquare$	Aggregate Y	Year-to-Date ▼ 650.00	]
	SUBTOTAL of Receipts This Page (optional)			85.00
	TOTAL This Period (last page this line number	only)		

	<b>A A V A</b>		FOR LINE NUMBER: PAGE 246 / 434			
SCHEDULE A (FEC Form	I 3 <b>A</b> )		(check only one)			
ITEMIZED RECEIPTS			X 11a 11b 11c 12			
Any information copied from such Repo	rts and Statements may	v not be sold or used by any perso	13     14     15     16     17       on for the purpose of soliciting contributions			
or for commercial purposes, other than	using the name and add	dress of any political committee to	solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
MEDCO HEALTH SOLUTION	SINC. POLITICAL A					
Full Name (Last, First, Middle Initial) A. MS MERIDITH DORNER			Date of Receipt			
Mailing Address 8010 ORCHAF	D VIEW LANE					
City	State	Zip Code	Transaction ID: INCA100837			
FOGELSVILLE	PA	18051	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		25.00			
Name of Employer MEDCO HEALTH SOLUTIONS		n CCT EXEC				
Receipt For:	I I	e Year-to-Date V	_			
Primary General		325.00	1			
Other (specify)	0 0					
Full Name (Last, First, Middle Initial) MICHEL DUFRESNE			Date of Receipt			
	Mailing Address 41ELM ST APT 3P					
City	State	Zip Code	0 6 1 8 2 0 1 1 Transaction ID: INCA101241			
MORRISTOWN	NJ	07960	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		192.30			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ENTE	n ERPRISE BUS INTELLIGEN	CE			
Receipt For:	I !	e Year-to-Date 🔻				
Other (specify)		2499.90	1			
		0 0 0 0 0 0 0	1			
Full Name (Last, First, Middle Initial) MR DANA DUNCAN	·		Date of Receipt			
Mailing Address 125 COMSTO	CK TRAIL		M M / D D / Y Y Y Y 06 18 2011			
City	State	Zip Code	Transaction ID: INCA101034			
EAST HAMPTON	СТ	06424	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		170.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n FECHNOLOGY				
Receipt For:	Aggregate	e Year-to-Date 🔻				
Primary     General       Other (specify) ▼	0 0	1870.00	]			
SUBTOTAL of Receipts This Page (or	otional)	•••••••••••••••••••••••••••••••••••••••	387.30			
TOTAL This Period (last page this line	number only)					

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 247 / 434 (check only one)		
	ITEMIZED RECEIPTS		for each category of the	$\overline{X}$ 11a 11b 11c 12		
			Detailed Summary Page			
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	⊥ y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY					
	Mailing Address 2 DECKER TERRACE			0 6 / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100869		
	KINNELON	NJ	07405	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
	Receipt For:	Aggregate	Year-to-Date 🔻			
	Primary General		325.00	1		
_	Other (specify) ▼	0 0	323.00			
В.	Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY			Date of Receipt		
Б.	Mailing Address 14026 KNOX STREET			0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100901		
	OVERLAND PARK	KS	66221	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE	n ES SEGMENT LEADER			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼	0 0	650.00	]		
- C.	Full Name (Last, First, Middle Initial) MR MARK DUNN	L		Date of Receipt		
	Mailing Address 2 OLD MILL ROAD			M M / D D / Y Y Y Y 06 18 2011		
	City	State	Zip Code	Transaction ID: INCA100873		
	SANDY HOOK	CT	06482	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		35.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n FECHNOLOGY			
	Receipt For:	Aggregate	e Year-to-Date 🔻	_		
	Other (specify) ▼	0 0	455.00	]		
ſ	SUBTOTAL of Receipts This Page (optional)			110.00		
	TOTAL This Period (last page this line number of	only)	·····			

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 248 / 434 (check only one)
	ITEMIZED RECEIPTS		for each category of the	$\overline{X}$ 11a 11b 11c 12
			Detailed Summary Page	
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR PETER DURAN	Date of Receipt		
	Mailing Address 875 HARRISTOWN RD	)		06 / 18 / Y Y Y Y 011 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City	State	Zip Code	Transaction ID: INCA100854
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		-
	Receipt For:		Year-to-Date V	-
	Primary General	, iggi oguto		
	Other (specify) <b>v</b>	0 0	325.00	
в.	Full Name (Last, First, Middle Initial) MS SUZANNE DURY			Date of Receipt
	Mailing Address 147 MIDLAND AVE			M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         1 8         2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101105
	PARK RIDGE	NJ	07656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	INESS REQUIREMENTS	-
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify) ▼		325.00	
C.	Full Name (Last, First, Middle Initial)			Date of Receipt
0.	Mailing Address 1400 POPLAR ESTATE	ES PKY		0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101387
	GERMANTOWN	TN	38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR RN F	PERF MGMT & IMPROVEM	→ ≡NT
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify) ▼		325.00	
				75.00
	SUBTOTAL of Receipts This Page (optional)			
	TOTAL This Period (last page this line number of	only)	►	

			[			
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 249 / 434		
	ITEMIZED RECEIPTS		for each category of the	(check only one)		
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$		
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	uy not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MS ARLENE EDLIN					
	Mailing Address 16 CHESTNUT STREE	T		M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: INCA101170		
	CORNWALL	NY	12518	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary General		325.00	1		
	Other (specify) <b>v</b>	0 0	525.00			
В.	Full Name (Last, First, Middle Initial) MS JANET EDWARDS			Date of Receipt		
Б.	Mailing Address N8W27837 WOODRID	GE LANE		0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101287		
	WAUKESHA	WI	53188	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLI	on NICAL SVCS			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼		325.00	]		
C.	Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS			Date of Receipt		
-	Mailing Address 379 DURHAM RD			0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100861		
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	on			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary     General       Other (specify) ▼		650.00	]		
	SUBTOTAL of Receipts This Page (optional)			100.00		
	TOTAL This Period (last page this line number of					
		,	·····			

		г <del></del>					
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 250 / 434 (check only one)			
	ITEMIZED RECEIPTS		for each category of the	$\overline{X}$ 11a 11b 11c 12			
			Detailed Summary Page				
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	n for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL AC	TION COMMITTEE (a.k.a	. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD			Date of Receipt			
	Mailing Address 128 SUMMIT AVENUE			M         M         /         D         D         /         Y			
	City	State	Zip Code	Transaction ID: INCA101266			
	UPPER MONTCLAIR	NJ	07043	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	CHIEF MEDICAL OFFIC				
	Receipt For:	Aggregate Ye					
	Primary General	Aggregate re		1			
	Other (specify)	0 0 0	650.00				
в.	Full Name (Last, First, Middle Initial) MR FREDERICK ELSTON			Date of Receipt			
	Mailing Address 106 GRAHAM TERRAC	E		M M / D D / Y Y Y Y 06 18 2011			
	City	State	Zip Code	Transaction ID: INCA101093			
	SADDLE BROOK	NJ	07663	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICA	L SPECIALIST				
	Receipt For:	Aggregate Ye	ar-to-Date 🔻				
	Primary     General       Other (specify) ▼		325.00	]			
C.	Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN			Date of Receipt			
	Mailing Address 359 LONG HILL ROAD	EAST		0 6 1 8 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA101268			
	BRIARCLIFF MANOR	NY	10510	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP C	COMMUNICATIONS				
	Receipt For:	Aggregate Ye	ar-to-Date 🔻				
	Other (specify) ▼		650.00				
	SUBTOTAL of Receipts This Page (optional)			125.00			
	CODICIAL OF RECEIPED THIS Faye (optional)		P				
	TOTAL This Period (last page this line number o	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 251 / 434           (check only one)				
	Any information copied from such Reports and St or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN	Date of Receipt					
	Mailing Address 75 TWEED BLVD		0 6 1 8 Y Y Y Y Y 0 1 8 2 0 1 1				
		State Zip Code NY 10960	Transaction ID: INCA100765				
	UPPER GRANDVIEW FEC ID number of contributing federal political committee.	NY 10960	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CMO SVP MEDICAL&ANLYTC AFF					
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2500.03					
_	Full Name (Last, First, Middle Initial)	0 0 0 0 0 0 0 0 0 0					
В.	MR SCOTT ERHARDT Mailing Address 11540 39TH AVE N		Date of Receipt				
	City	State Zip Code	Transaction ID: INCA100966				
	PLYMOUTH	MN 55441	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACCT SVCS & ADMIN					
	Receipt For:	Aggregate Year-to-Date V	_				
	Other (specify) ▼	650.00					
C.	Full Name (Last, First, Middle Initial) MR YAKOV ESTERLIS		Date of Receipt				
	Mailing Address 100 WINSTON DRIVE 17 C NORTH		M         M         /         D         D         /         Y				
		State Zip Code	Transaction ID: INCA101203				
	CLIFFSIDE PARK FEC ID number of contributing federal political committee.	NJ 07010	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	-				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	]				
	SUBTOTAL of Receipts This Page (optional)		267.31				
	TOTAL This Period (last page this line number of	unly)					

ç	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 252 / 434
	TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
I			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	Any information copied from such Reports and Stat or for commercial purposes, other than using the na	tements may ame and add	ا not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	angle MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR BRIAN EZROW			Date of Receipt
	Mailing Address 2524 WIEAND ROAD			06 / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100917
	QUAKERTOWN	PA	18951	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n E-COM STRAT & DELI	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify) ▼		325.00	
— В.	Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI			Date of Receipt
	Mailing Address 15804 SORAWATER DR	M M / D D / Y Y Y Y 06 18 2011		
	City	State	Zip Code	Transaction ID: INCA100883
	LITHIA	FL	33547	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		n CCT EXEC	
	Receipt For:	-	Year-to-Date V	-
	Primary     General       Other (specify) ▼		650.00	
– c.	Full Name (Last, First, Middle Initial) RICHARD FARIS			Date of Receipt
0.	Mailing Address 2020 HEATHER COVE			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101403
	MEMPHIS	TN	38119	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation	n _TH OUTCOME SOLUTIONS	3
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)		650.00	
Γ	SUBTOTAL of Receipts This Page (optional)			125.00
F				
	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 253 / 434         (check only one)
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	Any information copied from such Reports and s or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR DAMIR FATOVIC	Date of Receipt		
	Mailing Address 176 BEECHWOOD R	D		M M         /         D         D         /         Y
	City ORADELL	State NJ	Zip Code 07649	Transaction ID: INCA101005
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FIN		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 352.04	
В.	Full Name (Last, First, Middle Initial) SUSAN FAUST Mailing Address 6614 HERONSWOOI			Date of Receipt
		06 18 2011		
	City State MEMPHIS TN		Zip Code 38119	Transaction ID: INCA101374 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n IICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 650.00	]
C.	Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA			Date of Receipt
	Mailing Address 2354 DOLPHIN CT			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101014
	HENDERSON FEC ID number of contributing federal political committee.	C	89074	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n ARM PRACTICE	_
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date V 390.00	]
	SUBTOTAL of Receipts This Page (optional) .	•		92.08
	TOTAL This Period (last page this line number	r only)	I	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 254 / 434           (check only one)			
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)			
А.	Full Name (Last, First, Middle Initial) MR THOMAS FEITEL						
	Mailing Address 58 APPLE HILL DR			M         M         /         D         D         /         Y			
	City GILLETTE	State NJ	Zip Code 07933	Transaction ID: INCA101018 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		192.23			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP COF	RP MKTG & E-COMM				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 2498.99	]			
в.	Full Name (Last, First, Middle Initial) MR STUART FELDMAN			Date of Receipt			
	Mailing Address 109 MEADOWBROOK	0 6 / D D / Y Y Y Y 2 0 1 1					
	City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INCA100762 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS		R TECHNOLOGY				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 325.00	]			
C.	Full Name (Last, First, Middle Initial) MS DAWN FELDNER			Date of Receipt			
	Mailing Address 275 BIRCH STREET			M M / D D / Y Y Y Y 06 18 2011			
	City	State	Zip Code	Transaction ID: INCA101171			
	EMERSON FEC ID number of contributing federal political committee.	NJ C	07630	Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS REQUIREMENT	s			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	]			
	SUBTOTAL of Receipts This Page (optional)			242.23			
	TOTAL This Period (last page this line number of	only)					

	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 255 / 434           (check only one)         X           X         11a           13         14           15         16
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
×.	Full Name (Last, First, Middle Initial) FORREST FERRARI			Date of Receipt
	Mailing Address 1170 SW LIGHTHOU	SE DR		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101415
	PALM CITY	FL	34990	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 0	DPS ANALYSIS	
	Receipt For: Primary General	Aggregate	Year-to-Date V	_
	Other (specify)	0.0	780.00	
	Full Name (Last, First, Middle Initial) MR THOMAS FERRAZZANO	I		Date of Receipt
	Mailing Address 464 SPRING AVE.	M         M         /         D         /         Y		
	City RIDGEWOOD	State NJ	Zip Code	Transaction ID: INCA101123
	FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 1	TECHNOLOGY	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	]
	Full Name (Last, First, Middle Initial) MS EDYTHE FERRIS			Date of Receipt
	Mailing Address 246 SLATER RD			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100851
	TOLLAND	СТ	06084	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	R CLINICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 600.00	
Γ	SUBTOTAL of Receipts This Page (optional)	<u> </u>		135.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 256 / 434           (check only one)			
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) RONALD FIELMANN			Date of Receipt			
	Mailing Address 2061 ARLEEN CT			0 6 / D D / Y Y Y Y 0 6 / 1 8 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA101375			
	SCHAUMBURG FEC ID number of contributing		60194	Amount of Each Receipt this Period			
	federal political committee.	C		25.00			
	Name of Employer ACCREDO HEALTH GROUP	Occupation AVP SAL					
	Receipt For:	-	Year-to-Date V				
	Other (specify)	0 0	325.00	]			
В.	Full Name (Last, First, Middle Initial) MS JENNIFER FINIZIO			Date of Receipt			
	Mailing Address 58 DARLING AVENUE	Ē		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1			
	City State		Zip Code	Transaction ID: INCA101302			
	BLOOMFIELD FEC ID number of contributing	NJ	07003	Amount of Each Receipt this Period			
	federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MAR					
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	0 0	325.00	]			
C.	Full Name (Last, First, Middle Initial) MR DON FISCHER	I		Date of Receipt			
	Mailing Address 10 TRACY CIRCLE			0 6 1 8 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100870			
	CAMPBELL HALL FEC ID number of contributing	NY	10916	Amount of Each Receipt this Period			
	federal political committee.	C		23.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR T	i ECHNOLOGY				
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻	-			
	Other (specify) ▼	0 0	325.00				
	SUBTOTAL of Receipts This Page (optional)			75.00			
	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 257 / 434           (check only one)         X           X         11a           11b         11c           12           13         14           15         16
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may name and add	r not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		CTION COMMITTEE (a.k.a	a. Medco Health PAC)
·. ·	Full Name (Last, First, Middle Initial) MR EDWARD FISCHER			Date of Receipt
	Mailing Address 465 OLD STONE RD			06 / D D / Y Y Y Y 02011
	City	State	Zip Code	Transaction ID: INCA100936
	RIDGEWOOD FEC ID number of contributing federal political committee.	NJ C	07450	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		-		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 650.00	]
. –	Full Name (Last, First, Middle Initial) MS THERESA FITCH			Date of Receipt
	Mailing Address 180 COOK STREET #107			M         M         /         D         /         Y
	City DENVER	State CO	Zip Code 80206	Transaction ID: INCA101368 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	CT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	]
_	Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS	l		Date of Receipt
	Mailing Address 1933 MT. OLIVE AGOSTA ROAD			M         M         /         D         D         /         Y
	City NEW BLOOMINGTON	State OH	Zip Code 43341	Transaction ID: INCA101070 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR H	ILTH CARE OPS	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	
	SUBTOTAL of Receipts This Page (optional)			100.00

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	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 258 / 434					
	· · · ·		Use separate schedule(s) for each category of the	(check only one)					
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
			Detailed Summary Page						
ſ	Any information copied from such Reports and St	atements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions					
	or for commercial purposes, other than using the	name and ad	dress of any political committee to	o solicit contributions from such committee.					
1	NAME OF COMMITTEE (In Full)								
	MEDCO HEALTH SOLUTIONS INC. P	Medeo Health PAC)							
	MEDGO HEALTH SOLUTIONS INC. I	a medeo health AC)							
. '	Full Name (Last, First, Middle Initial)								
Α.		Date of Receipt							
	Mailing Address 6 SILVER LAKE DRIVE	=		0 6 1 8 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA101033					
	SHAMONG	NJ	08088	Amount of Each Receipt this Period					
				Amount of Lacin Necept this Fellod					
	FEC ID number of contributing federal political committee.	C		15.00					
	rederal political committee.								
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	on	7					
	MEDCO HEALTH SOLUTIONS								
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary General	00.00		1					
	Other (specify)	390.00							
				-					
-	Full Name (Last, First, Middle Initial)								
В.	CHAD FOREMAN			Date of Receipt					
	Mailing Address 9544 DOGWOOD EST	ATES		M M / D D / Y Y Y					
		06 18 2011							
	City	State	Zip Code	Transaction ID: INCA101408					
	GERMANTOWN	TN	38139	Amount of Each Receipt this Period					
	FEC ID number of contributing			05.00					
	federal political committee.	C		25.00					
	Name of Employer ACCREDO HEALTH GROUP	Occupatio							
		DIR FIN	_	_					
	Receipt For:	Aggregate	e Year-to-Date						
	Primary General		325.00						
	Other (specify)								
-									
C.	Full Name (Last, First, Middle Initial) HOLLEY FORTH			Date of Receipt					
0.				- '					
	Mailing Address 115 BAYSIDE COURT			0 6 1 8 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA101400					
	RICHMOND	CA	94804	Amount of Each Receipt this Period					
		0/1							
	FEC ID number of contributing federal political committee.	С		25.00					
	rederal political committee.								
	Name of Employer ACCREDO HEALTH GROUP	Occupatio	n	7					
	ACCREDO HEALTH GROUP	DIR PRO	DDUCT LINE						
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary General	00 - 0 -		1					
	Other (specify)		325.00						
				- 1					
]									
	SUBTOTAL of Receipts This Page (optional)		<b>•</b>	65.00					
ŀ			•						
	TOTAL This Period (last page this line number of	anly)							
	IVIAL THIS FERIOU (last page this line number of	y)							

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 259 / 434           (check only one)			
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Any information copied from such Reports and Statements may not be sold or used by any person of or for commercial purposes, other than using the name and address of any political committee to so					
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) KEVIN FRANCO			Date of Receipt			
	Mailing Address 140 BELLAIR ROAD UNIT Q			M         M         /         D         D         /         Y			
		State	Zip Code	Transaction ID: INCA101136			
	RIDGEWOOD FEC ID number of contributing	NJ C	07450	Amount of Each Receipt this Period 50.00			
	federal political committee.						
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n FINANCE				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	0.0	650.00	]			
В.	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt			
	Mailing Address 9 GREEN HILL TRAIL			0 6 / Y Y Y Y 0 6 1 8 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA101085			
		TX	76262	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		100.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP NA	m TIONAL SERVICE CENTER				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼		2600.00				
С.	Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL			Date of Receipt			
	Mailing Address 1434 NARRAGANSET	T BLVD		M M / D D / Y Y Y Y 06 18 2011			
	City	State	Zip Code	Transaction ID: INCA100894			
	CRANSTON FEC ID number of contributing	RI	02905	Amount of Each Receipt this Period			
	federal political committee.	C		30.00			
	Name of Employer MEDCO HEALTH SOLUTIONS		GOV AFFAIRS				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-			
	Other (specify) ▼	0 0	390.00				
	SUBTOTAL of Receipts This Page (optional)			180.00			
	TOTAL This Period (last page this line number	only)					

			[]	
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 260 / 434 (check only one)
	ITEMIZED RECEIPTS		for each category of the	
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	. Medco Health PAC)		
۴ A.	Full Name (Last, First, Middle Initial) FELIX FRUEH	Date of Receipt		
	Mailing Address 14401 FALLING LEAF I	DRIVE		M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA101330
	DARNESTOWN	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n EARCH & DEVELOPMENT	
	Receipt For:			-
	Primary General Aggregate			1
	Other (specify)	0 0	650.00	
- В.	Full Name (Last, First, Middle Initial) MR TRACY FURGIUELE			Date of Receipt
	Mailing Address 7773 TILLINGHAST DF	M M / D D / Y Y Y Y 06 18 2011		
	City	State	Zip Code	Transaction ID: INCA101154
	DUBLIN	OH	43017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & C	n HIEF PHARMACIST	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	1950.00	]
- C.	Full Name (Last, First, Middle Initial) MS CARISSA GABOROW			Date of Receipt
-	Mailing Address 6 JUHASZ ROAD			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101054
	NORWALK	СТ	06854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n BUSINESS DEVELOPMENT	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		325.00	
ſ				225.00
Ļ	SUBTOTAL of Receipts This Page (optional)		•	
	TOTAL This Period (last page this line number o	nly)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 261 / 434           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI			Date of Receipt
	Mailing Address 24 MOREHOUSE PL			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100761
		NJ	07974	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP & CC		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	650.00	
- В.	Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI			Date of Receipt
	Mailing Address 720 N. LARRABEE APT 1701			M         M         /         D         D         Y
	City CHICAGO	State	Zip Code	Transaction ID: INCA101214
	FEC ID number of contributing federal political committee.	C	60654	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP PH	n ARMA STRAT & SOLUTION	us
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 2500.03	]
- C.	Full Name (Last, First, Middle Initial) MS PATRICIA GALLAGHER			Date of Receipt
	Mailing Address 842 ASHLER CT			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101172
	COLUMBUS FEC ID number of contributing federal political committee.	OH C	43235	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n CCT EXEC	
	Receipt For: Primary General Other (specify) ▼	_ <b>I</b>	e Year-to-Date ▼ 325.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			267.31
	TOTAL This Period (last page this line number of		•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	1	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 262 / 434           (check only one)         11a           X         11a           13         14           15         16           17		
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may no name and addres	t be sold or used by any perso s of any political committee to	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M				
Α.	Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO			Date of Receipt		
	Mailing Address 69 LAKEVIEW DR			M         M         /         D         D         /         Y		
	City OLD TAPPAN	State NJ	Zip Code 07675	Transaction ID: INCA101066		
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIENT	RELATIONS			
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date <b>V</b> 650.00			
в.	Full Name (Last, First, Middle Initial) MICHAEL GALVIN			Date of Receipt		
	Mailing Address 25 BALLYMEADE ROA	Ŋ		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1		
		State	Zip Code	Transaction ID: INCA101245		
	HOPEWELL JUNCTION FEC ID number of contributing federal political committee.	C	12533	Amount of Each Receipt this Period 192.31		
	Name of Employer MEDCO HEALTH SOLUTIONS	-		FR States		
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date  2500.03	]		
C.	I Full Name (Last, First, Middle Initial) MR OMHARAISRIRAM GANGAIKONDAN-IYER			Date of Receipt		
	Mailing Address 9 CAIRNES ROAD			0 6 / D D / Y Y Y Y 0 6 18 2011		
		State	Zip Code	Transaction ID: INCA101253		
	MORRIS PLAINS FEC ID number of contributing federal political committee.	NJ C	07950	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHN	OLOGY	_		
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 325.00	]		
	SUBTOTAL of Receipts This Page (optional)		······	267.31		
	TOTAL This Period (last page this line number o	only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 263 / 434           (check only one)					
	Any information copied from such Reports and St or for commercial purposes, other than using the	13     14     15     16     17       a for the purpose of soliciting contributions solicit contributions from such committee.						
А.	Full Name (Last, First, Middle Initial) MR PETER GAYLORD	Date of Receipt						
	Mailing Address 1201 BRIDGE STREET	M         M         /         D         /         Y						
	City	State Zip Code	Transaction ID: INCA100760					
	ASBURY PARK	NJ 07712	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	70.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP TREASURY & FINANCIAL EVAL	<b>S</b>					
	Receipt For:	Aggregate Year-to-Date 🔻						
	Other (specify) ▼	850.00						
В.	Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA		Date of Receipt					
	Mailing Address 20 BROOKSHIRE DR	0 6 1 8 2 0 1 1						
	City	State Zip Code	Transaction ID: INCA100907					
	ROBBINSVILLE	NJ 08691	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	50.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM						
	Receipt For: Primary General	Aggregate Year-to-Date ▼						
	Other (specify) ▼	650.00						
с.	Full Name (Last, First, Middle Initial) LILLIAN GERMAN		Date of Receipt					
	Mailing Address 238A MARYLAND AVE	NE	M M / D D / Y Y Y Y 06 18 2011					
	City	State Zip Code	Transaction ID: INCA101349					
	WASHINGTON	DC 20001	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	30.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR GOV AFFAIRS	_					
	Receipt For: Primary General	Aggregate Year-to-Date						
	Other (specify) 🔻	390.00						
	SUBTOTAL of Receipts This Page (optional)	••••••	150.00					
	TOTAL This Period (last page this line number of	only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER:         PAGE 264 / 434           (check only one)         (Check only one)           X         11a         11b         11c         12					
1		Detailed Summary Page							
	Any information copied from such Reports and Si or for commercial purposes, other than using the	son for the purpose of soliciting contributions to solicit contributions from such committee.							
	/	angle MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N							
Α.	Full Name (Last, First, Middle Initial) MATTHEW GIBBS	Date of Receipt							
	Mailing Address 4110 N. WESTERN AV UNIT 2S	νE		0 6 1 8 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA101318					
	CHICAGO	IL	60618	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		75.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF C	n LINICAL OFFICER						
	Receipt For:		e Year-to-Date 🔻						
	Primary     General       Other (specify) ▼		975.00						
в.	Full Name (Last, First, Middle Initial) MR ROBERT GIBBS			Date of Receipt					
	Mailing Address 544 DENMOOR COUF	Mailing Address 544 DENMOOR COURT							
	City	State	Zip Code	Transaction ID: INCA100834					
	GALLOWAY	ОН	43119	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		12.50					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS							
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary     General       Other (specify) ▼	0 0	325.00						
с.	Full Name (Last, First, Middle Initial) MR THOMAS GILSON	1		Date of Receipt					
	Mailing Address 2 PELL FARM ROAD			0 6 1 8 2 0 1 1					
	City	State	Zip Code	Transaction ID: INCA101207					
	SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		192.31					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR						
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Other (specify) ▼	0 0	2500.03						
	SUBTOTAL of Receipts This Page (optional)			▶ 279.81					
	TOTAL This Period (last page this line number	only)							

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 265 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR SCOTT GILYARD			Date of Receipt
	Mailing Address 305 BERGAMOT DRIV	/E		M         M         /         D         D         /         Y
	City MEDINA	State MN	Zip Code 55340	Transaction ID: INCA100766
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio PRES U		-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 2499.90	]
В.	Full Name (Last, First, Middle Initial) MR JONAH GITLITZ Mailing Address 43 OVERLOOK RIDGE	I		Date of Receipt
			06 18 2011	
	City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INCA100846 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 <sup>-</sup>	ACCT EXEC	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
C.	Full Name (Last, First, Middle Initial) MR JOHN GOBINSKI			Date of Receipt
	Mailing Address 28 BARBARA DRIVE			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100927
	WARWICK FEC ID number of contributing federal political committee.	C	10990	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n E-COM STRAT & DELI	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			267.30
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 266 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	a. Medco Health PAC)		
∠ A.	Full Name (Last, First, Middle Initial) MR PAUL GOERDT	\ <del>_</del>		Date of Receipt
	Mailing Address 1700 SUNRISE COUF	{		0 6 / D D / Y Y Y Y 0 6 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101031
	BURNSVILLE FEC ID number of contributing federal political committee.	MN C	55306	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	on NICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	
– B.	Full Name (Last, First, Middle Initial) JOHN GOLDEN			Date of Receipt
	Mailing Address 8702 CHELMSFORD I	0 6 / D D / Y Y Y Y 0 6 18 2011		
	City	State	Zip Code	Transaction ID: INCA101389
	SPRING FEC ID number of contributing federal political committee.	TX C	77379	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP SALE		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
- C.	Full Name (Last, First, Middle Initial) MR JAMES GRANT, II			Date of Receipt
	Mailing Address 1928 BEVERLY LANE			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100926
	BUFFALO GROVE	IL	60089	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 1	ANCIAL INSIGHTS	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	]
Γ	SUBTOTAL of Receipts This Page (optional)	•		150.00
	TOTAL This Period (last page this line number	only)	I	

SCHEDUL	E A (FEC Form 3X RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)	PAGE 267 / 434
or for commercia	l purposes, other than using	on for the purpose of soliciting solicit contributions from such	contributions committee.		
	OMMITTEE (In Full) EALTH SOLUTIONS INC	. POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)	
A. LAURIE GREE				Date of Receipt	
Mailing Addre	ess 27760 WOODLAND	GREEN		06 <sup>18</sup>	2011
City		State	Zip Code	Transaction ID: INCA	
BOERNE FEC ID numb federal politica	per of contributing al committee.	TX C	78015	Amount of Each Receip	t this Period 25.00
Name of Emp MEDCO HEA	oloyer ALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS	_	
Receipt For: Primary Other (s	general specify) <b>▼</b>	Aggregate	e Year-to-Date V 325.00	]	
MR EDWARD	ast, First, Middle Initial) GRIX xss 525 ORANGEBURC	à RD		Date of Receipt	Y Y Y Y Y 2011
City		State	Zip Code	Transaction ID: INCA	2 0 1 1
PEARL RIV	/ER	NY	10965	Amount of Each Receip	
FEC ID numb federal politica	per of contributing al committee.	C			25.00
	oloyer ALTH SOLUTIONS		BUSINESS REQUIREMENT	s	
Receipt For: Primary Other (s	general specify) ♥	Aggregate	e Year-to-Date ▼ 325.00	]	
Full Name (La MS GINA GRU	ast, First, Middle Initial) JHN	Date of Receipt			
Mailing Addre	ess 13 WEATHER VAN	E DRIVE		M M / D D / 06 18	2011
City		State	Zip Code	Transaction ID: INCA	101003
<u>CONVENT</u>		NJ	07960	Amount of Each Receip	t this Period
federal politica		C			50.00
	oloyer ALTH SOLUTIONS		ACCOUNT SERVICES		
Receipt For: Primary Other (s	general specify) <b>▼</b>	Aggregate	e Year-to-Date ▼ 570.00	]	
SUBTOTAL of	Receipts This Page (optional	)			100.00
TOTAL This Pe	eriod (last page this line numb	per only)			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 268 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions of solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial)			Date of Receipt		
	Mailing Address 211 NORTH END AVE APT 3C	INUE		M         M         /         D         D         /         Y		
		State NY	Zip Code	Transaction ID: INCA100839		
	NEW YORK FEC ID number of contributing federal political committee.	C	10282	Amount of Each Receipt this Period 50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CON	n SUMER DRIVEN MKTS			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00			
B.	Full Name (Last, First, Middle Initial) MRS CAROLYN GUGLIELMO			Date of Receipt		
	Mailing Address 42 VETERANS PARK					
	City	State	Zip Code	Transaction ID: INCA101138		
	PEARL RIVER FEC ID number of contributing federal political committee.	NY C	10965	Amount of Each Receipt this Period		
			n CCT EXEC			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]		
C.	Full Name (Last, First, Middle Initial) MR RICHARD GUIOR			Date of Receipt		
	Mailing Address 50 BELLEVUE AVE			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100783		
	SUMMIT FEC ID number of contributing federal political committee.	NJ C	07901	Amount of Each Receipt this Period 90.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BIAC				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 1170.00	]		
	SUBTOTAL of Receipts This Page (optional)	•		165.00		
	TOTAL This Period (last page this line number	only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $269 / 434$ (check only one)X11a11b121314151617		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.		
Α.	Full Name (Last, First, Middle Initial) MS KAVITHA GULLAPALLI Mailing Address 67 ATHERTON CT			Date of Receipt		
	City	State	Zip Code			
	WAYNE	NJ	21p Code 07470	Transaction ID: INCA100925 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n :HNOLOGY	_		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]		
В.	Full Name (Last, First, Middle Initial) MS VALERIE HAERTEL Mailing Address 7 PARSLOE COURT			Date of Receipt		
	City	State	Zip Code	Transaction ID: INCA101299		
	MAHWAH FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INVE	n STOR RELATIONS	_		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]		
C.	Full Name (Last, First, Middle Initial) MR RICHARD HALPERN			Date of Receipt		
	Mailing Address 23 MAPLEMOOR LA	NE		M         M         /         D         D         /         Y		
		State	Zip Code	Transaction ID: INCA100844		
	WHITE PLAINS FEC ID number of contributing federal political committee.	C	10605	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]		
	SUBTOTAL of Receipts This Page (optional) .			100.00		
	TOTAL This Period (last page this line numbe	r only)				

ation copied from such Reports and mercial purposes, other than using 1 OF COMMITTEE (In Full) CO HEALTH SOLUTIONS INC me (Last, First, Middle Initial) EGORY HANSEN Address 1659 ISABELLA PA Address 1659 ISABELLA PA Mumber of contributing political committee. of Employer O HEALTH SOLUTIONS t For: rimary ☐ General Other (specify) ▼ me (Last, First, Middle Initial) ON HARRIS Address 186 N. WHITE STAT	the name and add C. POLITICAL A RKWAY State MN C Occupation SVP BUS Aggregate	ACTION COMMITTEE (a.k.a Zip Code 55318	Date of Receipt          M M M       /       D D       /       Y Y Y Y         0 6       1 8       2 0 1 1         Transaction ID: INCA101213         Amount of Each Receipt this Period         50.00
CO HEALTH SOLUTIONS INC me (Last, First, Middle Initial) EGORY HANSEN Address 1659 ISABELLA PA Madress 1659 ISABELLA PA KA P number of contributing political committee. of Employer O HEALTH SOLUTIONS t For: rimary General other (specify) ▼ me (Last, First, Middle Initial) NHARRIS Address 186 N. WHITE STAT PHIS P number of contributing political committee.	RKWAY State MN C Occupation SVP BUS Aggregate TION RD State TN	Zip Code 55318 n S TRANSFORMATION & CC Year-to-Date 650.00 Zip Code	Date of Receipt M M M / D D / Y Y Y Y 0 6 18 / 2011 Transaction ID: INCA101213 Amount of Each Receipt this Period 50.00 Date of Receipt M M / D D / Y Y Y 0 6 / 18 / 2011 Transaction ID: INCA101377 Amount of Each Receipt this Period
Address 1659 ISABELLA PA Address 1659 ISABELLA PA KA Political committee. of Employer O HEALTH SOLUTIONS t For: rimary General Other (specify) ♥ me (Last, First, Middle Initial) NHARRIS Address 186 N. WHITE STA PHIS Political committee.	State MN C Occupation SVP BUS Aggregate TION RD State TN	55318 n S TRANSFORMATION & CC P Year-to-Date ▼ 650.00 Zip Code	Date of Receipt M M M / D D / Y Y Y Y 2 0 1 1 Transaction ID: INCA101213 Amount of Each Receipt this Period Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1 Transaction ID: INCA101377 Amount of Each Receipt this Period
KA P number of contributing political committee. of Employer O HEALTH SOLUTIONS t For: rimary	State MN C Occupation SVP BUS Aggregate TION RD State TN	55318 n S TRANSFORMATION & CC P Year-to-Date ▼ 650.00 Zip Code	0 6       1 8       2 0 1 1         Transaction ID: INCA101213         Amount of Each Receipt this Period         50.00         Dote of Receipt         M M       /         0 6       /         1 8       2 0 1 1         Transaction ID: INCA101377         Amount of Each Receipt this Period
P number of contributing political committee. of Employer O HEALTH SOLUTIONS t For: rimary	MN C Occupation SVP BUS Aggregate TION RD State TN	55318 n S TRANSFORMATION & CC P Year-to-Date ▼ 650.00 Zip Code	Amount of Each Receipt this Period 50.00 Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1 Transaction ID: INCA101377 Amount of Each Receipt this Period
P number of contributing political committee. of Employer O HEALTH SOLUTIONS t For: rimary	C Occupation SVP BUS Aggregate TION RD State TN	n S TRANSFORMATION & CC e Year-to-Date 650.00 Zip Code	Date of Receipt
political committee. of Employer O HEALTH SOLUTIONS t For: rimary General other (specify) ♥ me (Last, First, Middle Initial) N HARRIS Address 186 N. WHITE STA <sup>®</sup> PHIS Phils	Coccupation SVP BUS Aggregate	S TRANSFORMATION & CC Year-to-Date 650.00 Zip Code	Date of Receipt Date of Receipt 0 6 / 1 8 / 2 0 1 1 Transaction ID: INCA101377 Amount of Each Receipt this Period
t For: rimary General other (specify) ▼ me (Last, First, Middle Initial) N HARRIS Address 186 N. WHITE STAT PHIS Phise Phis Phise Phise Phise Phise Phise Phise Phise Phi	TION RD State TN	S TRANSFORMATION & CC Year-to-Date 650.00 Zip Code	Date of Receipt M M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1 Transaction ID: INCA101377 Amount of Each Receipt this Period
rimary General other (specify) ▼ me (Last, First, Middle Initial) N HARRIS Address 186 N. WHITE STA PHIS Phils Phil	TION RD State TN	650.00 Zip Code	M M M       /       D       /       Y       Y       Y       Y         0 6       1 8       2 0 1 1         Transaction ID: INCA101377         Amount of Each Receipt this Period
other (specify) <b>▼</b> me (Last, First, Middle Initial) NHARRIS Address 186 N. WHITE STA <sup>®</sup> PHIS Philometric contributing political committee.	State TN	Zip Code	M M M       /       D       /       Y       Y       Y       Y         0 6       1 8       2 0 1 1         Transaction ID: INCA101377         Amount of Each Receipt this Period
Address 186 N. WHITE STA PHIS number of contributing political committee.	State TN		M M M       /       D       /       Y       Y       Y       Y         0 6       1 8       2 0 1 1         Transaction ID: INCA101377         Amount of Each Receipt this Period
PHIS number of contributing political committee.	State TN		0 6     1 8     2 0 1 1       Transaction ID: INCA101377       Amount of Each Receipt this Period
number of contributing political committee.	TN		Transaction ID: INCA101377 Amount of Each Receipt this Period
number of contributing political committee.		38117	
political committee.	C		25.00
EDO HEALTH GROUP	Occupation DIR HR	n	
t For: rimary General ther (specify) <b>▼</b>	Aggregate	e Year-to-Date ▼ 325.00	]
me (Last, First, Middle Initial) ANA HART	Date of Receipt		
Address 20 FAIR GREEN DF	0 6 1 8 2 0 1 1		
	State	Zip Code	Transaction ID: INCA100997
HY CLUB	TX	76262	Amount of Each Receipt this Period
number of contributing political committee.	C		50.00
of Employer O HEALTH SOLUTIONS			
t For: rimary General 0ther (specify) <b>▼</b>	Aggregate	e Year-to-Date V 650.00	]
	number of contributing political committee. of Employer D HEALTH SOLUTIONS For: rimary General	HY CLUB     TX       number of contributing political committee.     C       of Employer D HEALTH SOLUTIONS     Occupation SR NATL       For: rimary     General	HY CLUB     TX     76262       number of contributing political committee.     C       of Employer D'HEALTH SOLUTIONS     Occupation SR NATL ACCT EXEC       For: rimary     General

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 271 / 434           (check only one)         11a           X         11a           13         14           15         16           17			
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	a. Medco Health PAC)					
A.	Full Name (Last, First, Middle Initial) MR MARK HARTMANN			Date of Receipt			
	Mailing Address 8980 KNOBLE COURT	Т		0 6 1 8 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA100968			
		MN	55347	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACCT	MGMT				
	Receipt For: Aggregate		ear-to-Date 🔻				
	Other (specify) ▼		325.00				
- В.	Full Name (Last, First, Middle Initial) MR PETER HARTY			Date of Receipt			
	Mailing Address 19520 YELLOW WING	Mailing Address 19520 YELLOW WING COURT					
	City	State	Zip Code	Transaction ID: INCA100763			
	COLORADO SPRINGS	CO	80908	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		192.31			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP GOVER	RNMENT AFFAIRS				
	Receipt For:	Aggregate Y	ear-to-Date 🔻				
	Other (specify) ▼		2500.03	]			
С.	Full Name (Last, First, Middle Initial) DAN HAYES			Date of Receipt			
	Mailing Address 4679 AYRON TERRAC	CE		0 6 / <sup>D</sup> D / <sup>Y</sup> Y Y Y 0 6 1 8 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA101372			
	PALM HARBOR	FL	34685	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS					
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date <b>V</b> 325.00	]			
[	SUBTOTAL of Receipts This Page (optional)	I		242.31			
ľ	TOTAL This Period (last page this line number of						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 272 / 434         (check only one)			
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	a. Medco Health PAC)					
Α.	Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD			Date of Receipt			
	Mailing Address 13210 N. 11TH AVE.			M         M         /         D         D         /         Y			
	City PHOENIX	State AZ	Zip Code 85029	Transaction ID: INCA100866			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE		_			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]			
в.	Full Name (Last, First, Middle Initial) MR THOMAS HEKKER Mailing Address 28 WEST THRID STRE	ET #1222		Date of Receipt			
	City SOUTH ORANGE	State NJ	Zip Code 07079	Transaction ID: INCA101250 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	-	TECHNOLOGY				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 390.00	]			
C.	Full Name (Last, First, Middle Initial) MR SCOTT HELMUS			Date of Receipt			
	Mailing Address 23 VALLEY RD			M M / D D / Y Y Y Y 06 18 2011			
		State	Zip Code	Transaction ID: INCA100840			
	SUCCASUNNA FEC ID number of contributing federal political committee.	NJ C	07876	Amount of Each Receipt this Period 125.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIE	on INT SOLUTIONS				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1625.00	]			
	SUBTOTAL of Receipts This Page (optional)			180.00			
	TOTAL This Period (last page this line number of	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 273 / 434           (check only one)         Image: Constraint of the state o
	Any information copied from such Reports and S or for commercial purposes, other than using the	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) MR GLENN HERDLING			Date of Receipt
	Mailing Address 646 JAMES LN			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100985
	RIVER VALE	NJ	07675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CRE	n EATIVE DEVELOPMENT	
	Receipt For: Primary General	Aggregate	Year-to-Date V	_
	Other (specify) ▼	0.0	325.00	
В.	Full Name (Last, First, Middle Initial) MR ERIC HESS			Date of Receipt
	Mailing Address 10 CARLTON RD			0 6 1 8 Y Y Y Y 0 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100941
	<u>FLANDERS</u>	NJ	07836	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer MEDCO HEALTH SOLUTIONS		n INEERING & OPS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		780.00	
С.	Full Name (Last, First, Middle Initial) MS JANE HILDEBRANDT			Date of Receipt
	Mailing Address 35 CASCADE WAY			06 18 2011
	City	State	Zip Code	Transaction ID: INCA100963
	BUTLER	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1	OM STRAT & DELIV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ♥ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			110.00
	TOTAL This Period (last page this line number	only)		

				<b></b>
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 274 / 434 (check only one)
	ITEMIZED RECEIPTS		for each category of the	
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
	Any information copied from such Reports and Sta or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR DANIEL HLUDZINSKI			Date of Receipt
	Mailing Address 385 WASHINGTON ST			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA101197
	TAPPAN	NY	10983	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNI	on CAL SPECIALIST	_
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		325.00	1
	Other (specify) ▼	0 0	323.00	
В.	Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON			Date of Receipt
Б.	Mailing Address 16 LUTH TERRACE			0 6 1 8 2 0 1 1
	City	Zip Code	Transaction ID: INCA101069	
	WEST ORANGE	NJ	07052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on ARMACY OPS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	2496.00	]
C.	Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN			
-	Mailing Address 974 HILLCREST ROAD	)		0 6 / D D / Y Y Y Y 0 6 18 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101139
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FAC		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)     ▼	0 0	650.00	]
	SUBTOTAL of Receipts This Page (optional)			267.00
				-
	TOTAL This Period (last page this line number of	only)	Þ	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 275 / 434           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         17
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT	olicit contributions from such committee.	
Α.	CORNWALL ON HUDSON     I       FEC ID number of contributing federal political committee.     I       Name of Employer     Or	State Zip Code NY 12520	Date of Receipt M M / D D / Y Y Y Y 0 6 18 2011 Transaction ID: INCA100958 Amount of Each Receipt this Period 25.00
		ggregate Year-to-Date ▼ 325.00	
В.	Full Name (Last, First, Middle Initial) MR ROGER HOLLAND Mailing Address 41 SAINT RAPHAEL		Date of Receipt 0 6 1 8 2 0 1 1
		State Zip Code CA 92677	Transaction ID: INCA101062
			Amount of Each Receipt this Period 50.00
	MEDCO HEALTH SOLUTIONS	ccupation P SALES ggregate Year-to-Date ▼	-
	Primary General Other (specify) ▼	650.00	
C.	Full Name (Last, First, Middle Initial) MR JOHN HOLLINGER		Date of Receipt
0.	Mailing Address 784 CAPE HENRY DR		0 6 1 8 2 0 1 1
	-	State Zip Code	Transaction ID: INCA101072
		OH 43228	Amount of Each Receipt this Period
		ccupation	
	I !	ggregate Year-to-Date ▼ 260.00	1
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 276 / 434           (check only one)         11a           X         11a           13         14           15         16           17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) MR ROBERT HOLLIS			Date of Receipt
	Mailing Address 88 MILLS STREET			06 / <sup>D</sup> D D / <sup>Y</sup> Y Y Y 2011
	City	State	Zip Code	Transaction ID: INCA100947
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n NTERNATL BUSINESS DE	 V
			Year-to-Date V	
	Primary General Other (specify) ▼	0 0	325.00	]
В.	Full Name (Last, First, Middle Initial) ELIZABETH HOLLOWAY			Date of Receipt
	Mailing Address 9222 RANDLE VALLEY	Y DR		06 18 2011
	City	State	Zip Code	Transaction ID: INCA101398
	CORDOVA	TN	38018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			40.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation ASSISTA	n NT GENERAL COUNSEL	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	520.00	]
C.	Full Name (Last, First, Middle Initial) MR MATTHEW HOLMES	l		Date of Receipt
	Mailing Address 789 WESTON PARK D	)R		M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101023
	POWELL	OH	43065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	_ <b>!</b>	CT EXEC	
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)			90.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 277 / 434         (check only one)       11a         X       11a       11b         I       13       14       15       16       17		
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC. P	a. Medco Health PAC)				
A.	Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK	MR STEPHEN HOLODAK				
	Mailing Address 5 SUNCLIFF DR			06 18 2011		
	City	State	Zip Code	Transaction ID: INCA101091		
	TARRYTOWN	NY 10591		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		80.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INTE	n RVENTION DELIVERY SYS	ST		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_		
	Other (specify)	0 0	1040.00	]		
в.	Full Name (Last, First, Middle Initial) RITA HOLT			Date of Receipt		
	Mailing Address 1558 N PISGAH ROAD			0 6 / D D / Y Y Y Y 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101379		
	CORDOVA	TN	38016	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer ACCREDO HEALTH GROUP		IBURSEMENT	_		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-		
	Other (specify)	0 0	650.00	]		
C.	Full Name (Last, First, Middle Initial) MS CYNTHIA HORN			Date of Receipt		
	Mailing Address 9553 ANDREW DR			06 18 2011		
	City	State	Zip Code	Transaction ID: INCA101369		
	TWINSBURG	OH	44087	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CUS				
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify)	0 0	650.00			
	SUBTOTAL of Receipts This Page (optional)			180.00		
	TOTAL This Period (last page this line number of	only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 278 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17		
	Any information copied from such Reports and St or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to s				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	a. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial)	MR STEVEN HOROWITZ				
	Mailing Address 4 MELISSA COURT			0 6 / D D / Y Y Y Y 0 6 / 1 8 2 0 1 1		
	City MONTVILLE	State NJ	Zip Code 07045	Transaction ID: INCA101293		
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NEW	MARKETS FINANCE			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 650.00	]		
В.	Full Name (Last, First, Middle Initial) LYNN HOSTMYER			Date of Receipt		
	Mailing Address 6708 N.W. 112TH			0 6 / D D / Y Y Y Y 2 0 1 1		
		State	Zip Code	Transaction ID: INCA101384		
	OKLAHOMA CITY FEC ID number of contributing federal political committee.	OK C	73162	Amount of Each Receipt this Period		
	Name of Employer ACCREDO HEALTH GROUP	Occupation GENERA	L MGR - MULTI BRANCH			
	Receipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 325.00	]		
C.	Full Name (Last, First, Middle Initial) MR BERNARD HUKILL			Date of Receipt		
	Mailing Address 17219 CLOVIS			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101115		
	HELOTES FEC ID number of contributing federal political committee.	TX C	78023	Amount of Each Receipt this Period 50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 1300.00	]		
	SUBTOTAL of Receipts This Page (optional)			125.00		
	TOTAL This Period (last page this line number	only)	I			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 279 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscillations solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷ A.	Full Name (Last, First, Middle Initial) MR JEFFREY HULL			Date of Receipt
	Mailing Address 2616 S 3B'S & K RD			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
		State	Zip Code	Transaction ID: INCA101073
	GALENA FEC ID number of contributing federal political committee.	OH C	43021	Amount of Each Receipt this Period 32.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n HLTH CARE OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 416.00	]
в.	Full Name (Last, First, Middle Initial) MR DONALD HUMPHREY Mailing Address 93 WINCHESTER DR	IVE		Date of Receipt
	City	State	Zip Code	
	MONROE	NY	10950	Transaction ID: INCA101098 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 <sup>-</sup>	TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
- C.	Full Name (Last, First, Middle Initial) MRS KIMBERLY HUMPHRIES			Date of Receipt
	Mailing Address 10010 POINTE COVE			0 6 / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101399
	LAKELAND FEC ID number of contributing federal political committee.	TN	38002	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP BUSI	n NESS PLANNING	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			107.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 280 / 434         (check only one)       X         X       11a       11b       11c       12         X       13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	Medco Health PAC)	
۷ A.	Full Name (Last, First, Middle Initial) MR DAVID ISRAEL	Date of Receipt	
	Mailing Address 730 COLUMBUS AVE	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA100768
	NEW YORK	NY 10025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INT'L STAKEHOLDER RELATION	- S
	Receipt For:	Aggregate Year-to-Date	
	Other (specify) ▼	650.00	
- B.	Full Name (Last, First, Middle Initial) MS SUSAN ITO		Date of Receipt
	Mailing Address 6366 SW 90TH STREE	ET	M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA100779
	GAINESVILLE	FL 32608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR CLINICAL SVCS	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	600.00	
- с.	Full Name (Last, First, Middle Initial) MS MARIANNE JACKS		Date of Receipt
	Mailing Address 329 MORRIS AVENUE	<u>-</u>	M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA100816
		NJ 07046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
٦			
	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 281 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the	on for the purpose of soliciting contributions oscillations solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	I. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) BRENDA JACKSON	Date of Receipt		
	Mailing Address 7930 WINDER ROAD			M         M         /         D         D         /         Y
	City MACCLENNY	State FL	Zip Code 32063	Transaction ID: INCA101300 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n PRODUCT DEVELOPMENT	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]
В.	Full Name (Last, First, Middle Initial) MS TERESE JACKSON Mailing Address 6085 S. PRESTON LAN			Date of Receipt
				06 18 2011
	City NEW BERLIN	State WI	Zip Code 53151	Transaction ID: INCA100841 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	ACCT EXEC	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
C.	Full Name (Last, First, Middle Initial) MS MICHELLE JAEGER			Date of Receipt
	Mailing Address 302 HERMAN TERRAC	E		0 6 1 8 2 0 1 1
	City	State MN	Zip Code	Transaction ID: INCA101255
	HOPKINS FEC ID number of contributing federal political committee.	C	55343	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number c	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 282 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P			
A.	Full Name (Last, First, Middle Initial) MR JASON JAMES	Date of Receipt		
	Mailing Address RR 2 BOX 2036			06 18 Y Y Y Y 011 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City	State	Zip Code	Transaction ID: INCA100772
	CANADENSIS	PA	18325	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHY	<sup>n</sup> ′SICIAN ENGAGEMENT	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	455.00	]
В.	Full Name (Last, First, Middle Initial) MR TODD JEFFREY			Date of Receipt
	Mailing Address 15 ELIZABETH STREE	ΞT		M M         /         D D         /         Y Y         Y Y         Y
	City	State	Zip Code	Transaction ID: INCA101199
	DUMONT	NJ	07628	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n RM CONTRACT & CONSUL	TING
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		650.00	
с.	Full Name (Last, First, Middle Initial) MR EDWARD JESELSON			Date of Receipt
	Mailing Address 3270 KENNEY DR			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100877
	GERMANTOWN	TN	38139	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR NAT	<sup>n</sup> IONAL DISPENSING OPER	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)		••••••	110.00
	TOTAL This Period (last page this line number of	only)	•	

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 283 / 434
	· · ·	Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.	
1	NAME OF COMMITTEE (In Full)		
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) ROBERT JINKS	Date of Receipt	
	Mailing Address 22 PAGE AVE	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA100830
	LYNDHURST	NJ 07071	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS REQUIREMENTS	-
	Receipt For:	Aggregate Year-to-Date V	1
	Primary General		
	Other (specify)	650.00	
- В.	Full Name (Last, First, Middle Initial) MR WILLIAM JOEL		Date of Receipt
	Mailing Address 32 VENTOSA DR		M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA101008
	MORRISTOWN	NJ 07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANALYTICAL SVCS	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General	325.00	
	Other (specify)		
с.	Full Name (Last, First, Middle Initial) CHARLES JOHNSON		Date of Receipt
	Mailing Address 8277 FLORAL SPRING	GS	M M         /         D D         Y         Y Y         Y </th
	City	State Zip Code	Transaction ID: INCA101343
	CORDOVA	TN 38016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR FINANCE	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	325.00	
[	SUBTOTAL of Receipts This Page (optional)	۱ ۱	100.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 284 / 434
			for each category of the	(check only one)
			Detailed Summary Page	
[				13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. F			Modeo Health RAC)
	MEDGO HEAETT SOLUTIONS INC. T	. Medeo Health I AO		
, ,	Full Name (Last, First, Middle Initial)			Data of Descript
Α.	MRS ANNE JOHNSTON Mailing Address 700 S. HARBOUR ISL			Date of Receipt
	Mailing Address 700 S. HARBOUR ISL UNIT 432			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101194
	TAMPA	FL	33602	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Nome of Employer	Occupatio		-
	Name of Employer MEDCO HEALTH SOLUTIONS	· ·	INFO SERVICE CENTER	
	Receipt For:		e Year-to-Date V	-
	Primary General	Aggregat		1
	Other (specify)		325.00	
•	Full Name (Last, First, Middle Initial)			
В.	LATASHA JONES			Date of Receipt
	Mailing Address 7761 THUNDERSTONE CL S			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101409
	MEMPHIS	TN	38125	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer ACCREDO HEALTH GROUP		n 'ER CONTRACTING	
	Receipt For:			-
	Primary General	Aggregate	e Year-to-Date	
	Other (specify)		325.00	
~	Full Name (Last, First, Middle Initial)			Dele of Develop
C.	MRS REGINA JONES	50005		Date of Receipt
	Mailing Address POST OFFICE BOX 7	50995		06 18 2011
	City	State	Zip Code	Transaction ID: INCA100940
	LAS VEGAS	NV	89136	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		75.00
	Name of Employer	Occupatio		-
	Name of Employer ACCREDO HEALTH GROUP	VP CUS		
	Receipt For:	1 · · · · · · · · · · · · · · · · · · ·	e Year-to-Date 🔻	1
	Primary General	Jogan		
	Other (specify)		975.00	
,				
				125.00
	SUBTOTAL of Receipts This Page (optional)		•••••••••••••••••••••••••••••••••••••••	123.00
	<b>TOTAL</b> This Period (last page this line number	only)	····· •	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 285 / 434         (check only one)       X         X       11a       11b       11c       12         I3       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۷ A.	Full Name (Last, First, Middle Initial) MR RICHARD JONES	Date of Receipt	
	Mailing Address 12224 MONTCALM ST	M M / D D / Y Y Y Y 06 18 2011	
	City	State Zip Code	Transaction ID: INCA101141
	CARMEL	IN 46032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	650.00	
- В.	Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD		Date of Receipt
	Mailing Address 16357 VICTORIA CUR	VE SE	M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA100996
	PRIOR LAKE	MN 55372	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLIENT & MKT PROG STRAT	
	Receipt For: Primary General	Aggregate Year-to-Date ▼ 650.00	
	Other (specify)		
– C.	Full Name (Last, First, Middle Initial) MR DENNIS KACKLEY		Date of Receipt
	Mailing Address 32 EAST RIVERGLEN	DR	0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101075
	WORTHINGTON FEC ID number of contributing	OH 43085	Amount of Each Receipt this Period
	federal political committee.		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUST SVC	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	325.00	
	SUBTOTAL of Receipts This Page (optional)		87.50
F	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 286 / 434         (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	. Medco Health PAC)	
∠ A.	Full Name (Last, First, Middle Initial) MR JOHN KAPIOSKI	Date of Receipt	
	Mailing Address 8202 MARSH GLEN C	M M / D D / Y Y Y Y 06 18 2011	
	City	State Zip Code	Transaction ID: INCA101121
	TAMPA	FL 33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARMACY COMPLIANCE	
	Receipt For:	Aggregate Year-to-Date	
	Primary     General       Other (specify) ▼	650.00	
– В.	Full Name (Last, First, Middle Initial) MR STEVEN KARATY		Date of Receipt
	Mailing Address 19 PARK AVE		M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA100789
	POMPTON PLAINS	NJ 07444	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS PLANNING	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary   General     Other (specify)	325.00	
– c.	Full Name (Last, First, Middle Initial) MS MEIRA KATZ		Date of Receipt
	Mailing Address 820 WEST END AVE APT 7C		M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         1 8         2 0 1 1
	City	State Zip Code	Transaction ID: INCA101283
	NEW YORK	NY 10025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MARKET STRATEGY	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	220.00	
Γ	SUBTOTAL of Receipts This Page (optional)	······	85.00
F	<b>TOTAL</b> This Period (last page this line number	only)	

		· · · · · · · · · · · · · · · · · · ·	
	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 287 / 434
	ITEMIZED RECEIPTS	for each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stater	nents may not be sold or used by any person	
	or for commercial purposes, other than using the nam	olicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)		
	MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS BECKY KAUS		Date of Receipt
	Mailing Address N81 W18359 TOURS DR	M M / D D / Y Y Y Y 06 18 2011	
	City	State Zip Code	Transaction ID: INCA100976
	MENOMONEE FALLS	WI 53051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Nome of Employer	Desuration	-
		Decupation SR DIR CLINICAL SVCS	
		Aggregate Year-to-Date V	4
	Primary General		
	Other (specify)	325.00	
в.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address 63 MOUNTAIN GLEN ROA	AD	M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA101220
	RINGWOOD	NJ 07456	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
		Decupation	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	325.00	
C.	Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE		Date of Receipt
	Mailing Address 995 PINES TERR		0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100879
	FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
		Decupation SVP FINANCIAL & ANALYTICAL SVC	
		Aggregate Year-to-Date 🔻	]
	Primary General Other (specify) ▼	650.00	
	SUBTOTAL of Receipts This Page (optional)	▶	100.00
	TOTAL This Period (last page this line number only)	·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER:     PAGE 288 / 434       (check only one)     11a       X     11a     11b
Г		N	Detailed Summary Page	13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	a. Medco Health PAC)		
∡ ۹.	Full Name (Last, First, Middle Initial) MS MICHELLE KEHOE			Date of Receipt
	Mailing Address 26-1 FARMHOUSE LA	ANE		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
		State NJ	Zip Code	Transaction ID: INCA100807
	MORRISTOWN FEC ID number of contributing federal political committee.	C	07960	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n INT'L MARKETS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
- 3.	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III			Date of Receipt
	Mailing Address 1970 WOODLANDS PL			0 6 / D D / Y Y Y Y 2 0 1 1
	City State		Zip Code	Transaction ID: INCA101067
	POWELL FEC ID number of contributing federal political committee.	OH C	43065	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio GENER	n AL MGR GROUP	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]
_ ).	Full Name (Last, First, Middle Initial) MR KEVIN KELLY			Date of Receipt
	Mailing Address 251 POPLAR AVE			06 18 2011
	City	State	Zip Code	Transaction ID: INCA100814
	HACKENSACK FEC ID number of contributing federal political committee.	NJ	07601	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
Γ	SUBTOTAL of Receipts This Page (optional)	I	······	100.00
	TOTAL This Period (last page this line number	only)	·····	
	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 289 / 434         (check only one)
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	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may n e name and addre	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL AC	TION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR PETER KENNY			Date of Receipt
	Mailing Address 111 BEVERLY RD			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101173
	FAIRFIELD NJ		07094	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR AC	CT MGMT	
			ear-to-Date V	
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>		325.00	
- В.	Full Name (Last, First, Middle Initial) MS INNA KHANIN			Date of Receipt
	Mailing Address 3403 SPRINGBROOK	0 6 / Y Y Y Y 0 6 1 8 2 0 1 1		
	City State		Zip Code	Transaction ID: INCA101247
	EDISON	NJ	08820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICA	L SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date 325.00	]
- C.	Full Name (Last, First, Middle Initial) SUE ANN KIRST			Date of Receipt
	Mailing Address 203 GARNET AVENU	IE		0 6 / D D / Y Y Y Y 0 6 / 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101421
	NEWPORT BEACH	CA	92662	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERAL		
	Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			75.00
ľ	TOTAL This Period (last page this line number	r only)	I	

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 290 / 434 (check only one)
	ITEMIZED RECEIPTS		for each category of the	
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)		,,	
	MEDCO HEALTH SOLUTIONS INC. PO	Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MS DONNA KLEIN	Date of Receipt		
	Mailing Address 1080 FOREST CLIFF D	DRIVE		06 / D D / Y Y Y Y 02011
	City	State	Zip Code	Transaction ID: INCA101367
	LAKEWOOD	OH	44107	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		n CCT EXEC	-
	Receipt For:		e Year-to-Date V	-
	Primary General	Aggrogat		
	Other (specify)	0 0	325.00	
В.	Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER			Date of Receipt
	Mailing Address 121 CONKLING TOWN	0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101184
	CHESTER	NY	10918	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n ACCT MGMT	_
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	650.00	
C.	Full Name (Last, First, Middle Initial) KENNETH KLEPPER			Date of Receipt
0.	Mailing Address 295 GLEN PLACE			M         M         /         D         /         Y
	City	State	Zip Code	Transaction ID: INCA101233
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio PRES &	n CHIEF OPERATING OFFICI	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	2499.90	
	SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	267.30
			·	
	<b>TOTAL</b> This Period (last page this line number of	only)	····· ►	

				<b></b>
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 291 / 434 (check only one)
	ITEMIZED RECEIPTS		for each category of the	
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
	MEDCO HEALTH SOLUTIONS INC. PO	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) RICHARD KLUSOVSKY	Date of Receipt		
	Mailing Address 1016 FAIRWOOD LAN	M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: INCA101390
	ACWORTH	GA	30101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio AVP MA	n NAGED CARE	-
			e Year-to-Date 🔻	
	Primary General		325.00	1
	Other (specify)	0 0		
в.	Full Name (Last, First, Middle Initial) MS LORI KOEHNEN			Date of Receipt
	Mailing Address 6920 DYLAN LANE			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101041
	INDEPENDENCE	MN	55359	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on GENERIC STRAT & CUST [	v
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	]
C.	Full Name (Last, First, Middle Initial) MR BRADFORD KOGEN			Date of Receipt
	Mailing Address 555 FORBUSH STREE	Т		0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101175
	BOONTON	NJ	07005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on CLIENT RETAIL	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		325.00	]
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number o	niy)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 292 / 434           (check only one)				
	Any information copied from such Reports and St or for commercial purposes, other than using the	13     14     15     16     17       for the purpose of soliciting contributions olicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P						
Α.	Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI	MS KATHLEEN KORDUCKI					
	Mailing Address 920 CLARK STREET	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1					
		State Zip Code	Transaction ID: INCA100847				
	BOWLING GREEN FEC ID number of contributing federal political committee.	OH 43402	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00					
в.	Full Name (Last, First, Middle Initial) MS ANNE KRAFT Mailing Address 28 ROSEMILT PLACE		Date of Receipt				
		06 18 2011					
	City MORRISTOWN	State Zip Code NJ 07960	Transaction ID: INCA101321 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer MEDCO HEALTH SOLUTIONS		Occupation DIR MARKET SEGMENT SOLUTIONS	5				
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date  325.00					
C.	Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY		Date of Receipt				
	Mailing Address 143 DEERFIELD TERF	ACE	M M / D D / Y Y Y Y 06 18 2011				
	City	State Zip Code	Transaction ID: INCA100888				
	MAHWAH FEC ID number of contributing federal political committee.	NJ 07430	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR PRODUCT					
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 325.00					
	SUBTOTAL of Receipts This Page (optional)		100.00				
	TOTAL This Period (last page this line number of	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 293 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and addr	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ALEXANDER KRYNICKI			Date of Receipt
	Mailing Address 60 BEECH ROAD			M         M         /         D         D         /         Y
	City RANDOLPH	State	Zip Code	Transaction ID: INCA100791
	FEC ID number of contributing federal political committee.	NJ C	07869	Amount of Each Receipt this Period 25.00
	Name of Employer Occupation MEDCO HEALTH SOLUTIONS SR DIR 1		ECHNOLOGY	
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]
В.	Full Name (Last, First, Middle Initial) MS BARBARA KRZAK Mailing Address 495 ISLAND WAY			Date of Receipt
		<b>0</b> 1	7. 0. 1	06 18 2011
	City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INCA101099 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 1	TECHNOLOGY	
	Receipt For: Primary General Other (specify) ♥	Aggregate \	Year-to-Date  715.00	]
C.	Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN			Date of Receipt
	Mailing Address 2735 YORK RD			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101155
	COLUMBUS FEC ID number of contributing federal political committee.	OH C	43221	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP MEM	IBER SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2600.00	]
	SUBTOTAL of Receipts This Page (optional)	•		280.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 294 / 434           (check only one)			
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may r e name and addre	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL AG	CTION COMMITTEE (a.k.a	a. Medco Health PAC)			
, A.	Full Name (Last, First, Middle Initial) MR DEEPAK KUMAR	MR DEEPAK KUMAR					
	Mailing Address 16 NORTH ROAD			0 6 / D D / Y Y Y Y Y Y Y Y			
		State	Zip Code	Transaction ID: INCA101050			
	KINNELON NJ		07405	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer Occup MEDCO HEALTH SOLUTIONS DIR 1		INOLOGY				
	Receipt For: Primary General	Aggregate Y	Year-to-Date ▼	_			
	Other (specify) ▼	0 0	325.00				
В.	Full Name (Last, First, Middle Initial) MR MANOJ KUMAR	1		Date of Receipt			
	Mailing Address 7 SUNRISE WAY			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA101089			
	TOWACO	NJ	07082	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		30.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS	S PROCESS CHAMPION				
	Receipt For: Primary General	Aggregate Y	Year-to-Date ▼				
	Other (specify) ▼	0 0 0	390.00				
С.	Full Name (Last, First, Middle Initial) MR FRANK KURILLA			Date of Receipt			
	Mailing Address 88 WATCH HILL ROA	AD.		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA101309			
	HACKETTSTOWN	NJ	07840	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACCT	MGMT				
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 325.00	]			
	SUBTOTAL of Receipts This Page (optional)			80.00			
	TOTAL This Period (last page this line number	r only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 295 / 434           (check only one)         11c         12           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	r not be sold or used by any persol lress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR MARK LANDY			Date of Receipt
	Mailing Address 18 LADIK PL			0 6 / D D / Y Y Y Y 2 0 1 1
	City MONTVALE	State NJ	Zip Code 07645	Transaction ID: INCA101095
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SVC	DELIVERY SYSTEM	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 975.00	]
в.	Full Name (Last, First, Middle Initial) MR EDWARD LAPUSHCHIK			Date of Receipt
	Mailing Address 2 OLD LANE			0 6 1 8 2 0 1 1
		State	Zip Code	Transaction ID: INCA101243
	MONTVILLE FEC ID number of contributing federal political committee.	NJ C	07045	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 325.00	]
С.	Full Name (Last, First, Middle Initial) MR MARCELO LAROSA			Date of Receipt
	Mailing Address 162 HILLTOP ROAD			M M / D D / Y Y Y Y 06 18 2011
	City MONROE	State	Zip Code	Transaction ID: INCA100815
	MONROE           FEC ID number of contributing           federal political committee.	C	10950	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	CLIENT SVC DELIVERY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	]
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number of	only)		

mmercial purposes, other than using t E OF COMMITTEE (In Full)	d Statements may not be sold or used by any personance of any political committee to         the name and address of any political committee to         . POLITICAL ACTION COMMITTEE (a.k.a.         DURT         State       Zip Code         C         Occupation         SR DIR GOVERNMENT AFFAIRS         Aggregate Year-to-Date         1300.00	solicit contributions from such committee.         . Medco Health PAC)         Date of Receipt         0 6       1 8         2 0 1 1         Transaction ID: INCA101056         Amount of Each Receipt this Period         100.00
DCO HEALTH SOLUTIONS INC Name (Last, First, Middle Initial) SYNTHIA LAUBACHER Ing Address 1100 KIMBERLY CO SEVILLE ID number of contributing al political committee. e of Employer ICO HEALTH SOLUTIONS sipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) IELE LAW	DURT State Zip Code CA 95661 C Occupation SR DIR GOVERNMENT AFFAIRS Aggregate Year-to-Date ▼	Date of Receipt          M M       /       D       0       /       Y
SYNTHIA LAUBACHER Ing Address 1100 KIMBERLY CC SEVILLE ID number of contributing al political committee. e of Employer CO HEALTH SOLUTIONS sipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) IELE LAW	State     Zip Code       C     95661       C     Occupation       SR DIR GOVERNMENT AFFAIRS       Aggregate Year-to-Date	M M       /       D       D       /       Y       Y       Y         Transaction ID: INCA101056         Amount of Each Receipt this Period         100.00
SEVILLE ID number of contributing al political committee. e of Employer CO HEALTH SOLUTIONS sipt For: Primary	State     Zip Code       C     95661       C     Occupation       SR DIR GOVERNMENT AFFAIRS       Aggregate Year-to-Date	0 6       1 8       2 0 1 1         Transaction ID: INCA101056         Amount of Each Receipt this Period         100.00
ID number of contributing al political committee. e of Employer ICO HEALTH SOLUTIONS eipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) IELE LAW	CA 95661 C Occupation SR DIR GOVERNMENT AFFAIRS Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 100.00 Date of Receipt
ID number of contributing al political committee. e of Employer ICO HEALTH SOLUTIONS eipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) IELE LAW	C Occupation SR DIR GOVERNMENT AFFAIRS Aggregate Year-to-Date ▼	100.00 Date of Receipt
al political committee. e of Employer ICO HEALTH SOLUTIONS sipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) IELE LAW	Occupation SR DIR GOVERNMENT AFFAIRS Aggregate Year-to-Date ▼	Date of Receipt
ipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) IELE LAW	SR DIR GOVERNMENT AFFAIRS Aggregate Year-to-Date	
Primary General Other (specify) ▼ Name (Last, First, Middle Initial) IELE LAW		
Other (specify) ▼ Name (Last, First, Middle Initial) IELE LAW	1300.00	—
IELE LAW		—
ng Address 600 KINGFRED DR		
		0 6 / D D / Y Y Y Y 2 0 1 1
	State Zip Code	Transaction ID: INCA101392
RTH HUNTINGDON	PA 15642	Amount of Each Receipt this Period
ID number of contributing al political committee.		25.00
e of Employer REDO HEALTH GROUP	Occupation DIR TRC	
eipt For: Primary General Other (specify) <b>▼</b>	Aggregate Year-to-Date ▼ 325.00	]
Name (Last, First, Middle Initial) _ LEAPO		Date of Receipt
ng Address 1 CHRISTIAN DRIV	E	M M / D D / Y Y Y Y 06 / 18 / 2011
	State Zip Code	Transaction ID: INCA101230
ID number of contributing	C	Amount of Each Receipt this Period 26.00
e of Employer CO HEALTH SOLUTIONS		
· ·	Aggregate Year-to-Date V 338.00	]
ipt For: Primary General Other (specify) <b>▼</b>		
	T BRUNSWICK ID number of contributing al political committee. of Employer CO HEALTH SOLUTIONS pt For: Primary General	State     Zip Code       T BRUNSWICK     NJ     08816       ID number of contributing al political committee.     C       e of Employer CO HEALTH SOLUTIONS     Occupation SR DIR TECHNOLOGY       pt For: Primary     General

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 297 / 434
	· · · ·	Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
		13 14 15 16 17	
	Any information copied from such Reports and St or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.	
1	NAME OF COMMITTEE (In Full)		
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) EMMA LEVIN		Date of Receipt
	Mailing Address 18 SALEM RD		M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: INCA101297
	EAST BRUNSWICK	NJ 08816	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	-
	Receipt For:	Aggregate Year-to-Date V	1
	Primary General		
	Other (specify)	325.00	
в.	Full Name (Last, First, Middle Initial) MR ROBERT LONG		Date of Receipt
	Mailing Address 18 HARLIND TERRAC		M         M         /         D         D         Y
	City	State Zip Code	Transaction ID: INCA101044
	RAMSEY	NJ 07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	650.00	
- C.	Full Name (Last, First, Middle Initial) DAVID LOSCHINSKEY		Date of Receipt
	Mailing Address 4500 MT GILLESPIE D	R	0 6 / 1 8 / 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101396
	LAKELAND	TN 38002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BIAC	
	Receipt For:	Aggregate Year-to-Date V	7
	Primary General Other (specify)	650.00	
-			
	SUBTOTAL of Receipts This Page (optional)	••••••	125.00
	TOTAL This Period (last page this line number of	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 298 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to s					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F						
A.	Full Name (Last, First, Middle Initial)     MICHELLE LOTT	Date of Receipt					
	Mailing Address 232 EVERGREEN CT			M         M         /         D         D         /         Y			
	City	State	Zip Code	Transaction ID: INCA101272			
	MOUNTAINSIDE	NJ	07092	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRC	n DJECT MGMT				
			e Year-to-Date 🔻				
	Other (specify) ▼	0 0	325.00				
- В.	Full Name (Last, First, Middle Initial) MR BRICE LOVE	I		Date of Receipt			
	Mailing Address 2390 BRANDON RD			M M / D D / Y Y Y Y 06 / 18 / 2011			
	City	State	Zip Code	Transaction ID: INCA101000			
		OH	43221	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		12.50			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	TRC				
	Receipt For: Primary General	Aggregate	e Year-to-Date				
	Other (specify) ▼	0.0	325.00				
С.	Full Name (Last, First, Middle Initial) MR ROSS LUCE	I		Date of Receipt			
	Mailing Address 1066 WEST GROVE C	СТ		M         M         /         D         D         /         Y			
	City	State	Zip Code	Transaction ID: INCA100900			
	GIBSONIA	PA	15044	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 780.00	]			
	SUBTOTAL of Receipts This Page (optional)		······	67.50			
	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 299 / 434         (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	e name and ad	ly not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	/ Full Name (Last, First, Middle Initial) ERICA MACK	Date of Receipt		
	Mailing Address 221 DELTA DRIVE			M         /         D         D         Y
	City	State	Zip Code	Transaction ID: INCA101386
	MARION	AR	72364	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR ENT	on FERPRISE OPS	
			e Year-to-Date 🔻	_
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	225.00	
- В.	Full Name (Last, First, Middle Initial) MS VERONA MACMAHON	I		Date of Receipt
	Mailing Address 1504 WEST CULLOM UNIT G			06 / <sup>Y</sup> Y Y Y 18 / 2011
	City State CHICAGO IL		Zip Code	Transaction ID: INCA101200
	FEC ID number of contributing	C	60613	Amount of Each Receipt this Period
	federal political committee.	U		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR J	on ACCT MGMT OPS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	325.00	
- C.	Full Name (Last, First, Middle Initial) MR MUDIT MAHESHWARI	ı		Date of Receipt
	Mailing Address 14 WATCHUNG TRL			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: INCA100965
	BRANCHBURG	NJ	08876	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FIN	ANCE	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	325.00	
ſ	SUBTOTAL of Receipts This Page (optional)			75.00
ľ	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 300 / 434
	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
	Any information copied from such Reports and Si or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)	name anu du		
	MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR KENNETH MALLEY	Date of Receipt		
	Mailing Address 764 W. SADDLE RIVE	R ROAD		06 / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100942
	HO HO KUS	NJ	07423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
			e Year-to-Date V	-1
	Primary General	, iggi ogui		1
	Other (specify)	0 0	2496.00	
в.	Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO			Date of Receipt
	Mailing Address 33 HICKORY TAVERN	M · M         /         D · D         Y         Y · Y         <		
	City	State	Zip Code	Transaction ID: INCA100781
	GILLETTE	NJ	07933	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		650.00	]
с.	Full Name (Last, First, Middle Initial) MS MICHELLE MANOLOVIC	<u> </u>		Date of Receipt
~-	Mailing Address 28640 BRAELOCH CC	URT		0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100810
	LAKE BLUFF	IL	60044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	390.00	]
	SUBTOTAL of Receipts This Page (optional)	l	<b>\</b>	272.00
	TOTAL This Period (last page this line number of	only)	····· •	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	tatements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 301 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17           Defor the purpose of soliciting contributions         10         17
	or for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL A	ACTION COMMITTEE (a.k.a	I. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS ILENE MARCUS	Date of Receipt		
	Mailing Address 97 BLUEBERRY DR	0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101109
	WOODCLIFF LAKE DR	NJ	07675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n FINANCE	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	325.00	]
В.	Full Name (Last, First, Middle Initial) MR JOSEPH MARINELLI			Date of Receipt
	Mailing Address 351 SOUND BEACH A	M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: INCA100884
	OLD GREENWICH	CT	06870	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n MEDICARE OPS	
		Aggregate	Year-to-Date 🔻	_
	Primary     General       Other (specify)     Image: Content of the specify of the specify of the specify of the specify of the specific of the speci	0 0	325.00	
С.	Full Name (Last, First, Middle Initial) LORI MARINO	· · · · · · · · · · · · · · · · · · ·		Date of Receipt
	Mailing Address 31 UNDERWOOD DRI	IVE		06 / D D / Y Y Y Y 02011
	City	State	Zip Code	Transaction ID: INCA101317
	WEST ORANGE	NJ	07052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST GE	n ENERAL COUNSEL	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	600.00	
	SUBTOTAL of Receipts This Page (optional)		·····	100.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	itatements ma	Use separate schedule(s) for each category of the Detailed Summary Page ay not be sold or used by any per- idress of any political committee	FOR LINE NUMBER:       PAGE 302 / 434         (check only one)       11c       12         X       11a       11b       11c       12         13       14       15       16       17         son for the purpose of soliciting contributions to solicit contributions from such committee.       17
	MEDCO HEALTH SOLUTIONS INC. F Full Name (Last, First, Middle Initial)	POLITICAL	ACTION COMMITTEE (a.k.	
Α.	MS TAMARA MARSHALL-IGUNBOR Mailing Address W144 N7150 TERRAC	CE DRIVE		Date of Receipt
	City	State	Zip Code	Transaction ID: INCA100972
	MENOMONEE FALLS	WI	53051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	
в.	Full Name (Last, First, Middle Initial) MR JOSEPH MARSIGLIANO Mailing Address 11 ECHO HILL ROAD	I		Date of Receipt
	City	State	Zip Code	Transaction ID: INCA101319
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	1 · · · · · · · · · · · · · · · · · · ·	on TECHNOLOGY e Year-to-Date ▼ 325.00	
С.	Full Name (Last, First, Middle Initial) MRS SHELLY MARTIN Mailing Address 9536 DOE MEADOW	DR		Date of Receipt
	City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INCA101402 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HR		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
	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 sch for each category Detailed Summar	
	or for commercial purposes, other than using the	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	OLITICAL ACTION COMMIT	ITEE (a.k.a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR TODD MARTIN	Date of Receipt	
	Mailing Address 11825 SHEPPARDS C	ROSSING	0 6 / 1 8 / Y Y Y Y 0 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100919
	CLARKSVILLE FEC ID number of contributing federal political committee.	MD 21029	Amount of Each Receipt this Period 192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	499.90
- B.	Full Name (Last, First, Middle Initial) MR WILLIAM MARTIN Mailing Address 2601 FOX HLL CIRCLI	EAST	Date of Receipt
		06 18 2011	
	City GERMANTOWN	State Zip Code TN 38139	Transaction ID: INCA101325 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation GROUP VP BUS DEV	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date V	650.00
- C.	Full Name (Last, First, Middle Initial) MR EDWARD MARTINEZ Mailing Address 35 SALTER PLACE		Date of Receipt
	Maining Address 33 SALTER PLACE		06 18 2011
	City MAPLEWOOD	State Zip Code NJ 07040	Transaction ID: INCA101251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRODUCT MGM	т
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date V	325.00
ſ	SUBTOTAL of Receipts This Page (optional)		267.30
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 304 / 434         (check only one)       Image: Check only one of the state of the s
	Any information copied from such Reports and S or for commercial purposes, other than using the	for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۷ A.	Full Name (Last, First, Middle Initial) MR JEFFREY MAY	Date of Receipt	
	Mailing Address 137 WASHINGTON A	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA101143
	HILLSDALE	NJ 07642	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHARMA STRAT & SOLUTIONS	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	2499.90	
- В.	Full Name (Last, First, Middle Initial) MR TERENCE MAYTIN		Date of Receipt
	Mailing Address 496 FRANKLIN AVE		M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA100913
	WYCKOFF	NJ 07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-COM STRATEGY & DELIVERY	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	325.00	
– c.	Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE	I	Date of Receipt
	Mailing Address 19 FARMINGTON CO	URT	M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA100950
	RAMSEY	NJ 07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP SALES AND MARKETING	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	650.00	
ſ	SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	267.30
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 305 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions
		POLITICAL ACTION COMMITTEE (a.k.a.	
۷ A.	Full Name (Last, First, Middle Initial) THOMAS MCCANN	Date of Receipt	
	Mailing Address 9600 DOVE SPRING (	06 / 18 / Y Y Y Y 011 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
		State Zip Code	Transaction ID: INCA101404
	GERMANTOWN FEC ID number of contributing federal political committee.	TN 38139	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP SALES	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
- В.	Full Name (Last, First, Middle Initial) MS SHANNON MCCRUDDEN Mailing Address 4 MANCHESTER COL	I	Date of Receipt
	City		
	KINNELON	State Zip Code NJ 07405	Transaction ID: INCA101252 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRICING	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- c.	Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD	I	Date of Receipt
	Mailing Address 0-45 27TH ST		06 18 2011
	City FAIR LAWN	State Zip Code NJ 07410	Transaction ID: INCA101092
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
ſ	SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	100.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 306 / 434           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         1'
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
×.	Full Name (Last, First, Middle Initial) MRS TRACEY MCGUIRE			Date of Receipt
	Mailing Address 19 FARMINGTON CC	06 18 2011		
	City	State	Zip Code	Transaction ID: INCA100790
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify)	0 0	325.00	
	Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH			Date of Receipt
	Mailing Address 87 ROSELAWN RD	M + M         /         D + D         /         Y + Y + Y         Y           0 6         1 8         2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101055
	HIGHLAND MILLS	NY	10930	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST GE	n ENERAL COUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2496.00	]
	Full Name (Last, First, Middle Initial) MR WILLIAM MCLAUGHLIN			Date of Receipt
	Mailing Address 8 BATES CIRCLE			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101210
	FLORIDA	NY	10921	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
Γ	SUBTOTAL of Receipts This Page (optional) .			242.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate s for each categ Detailed Summ					
	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMM	/ITTEE (a.k.a. Medco Health PAC)				
×.	Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA		Date of Receipt				
	Mailing Address 112 GREEN TERRA	CE WAY	0 6 / 1 8 / Y Y Y Y 0 1 8 / 2 0 1 1				
	City	State Zip Code	Transaction ID: INCA101193				
	WEST MILFORD FEC ID number of contributing federal political committee.	NJ 07480	Amount of Each Receipt this Period 192.31				
	Name of Employer MEDCO HEALTH SOLUTIONS						
	Receipt For:	SVP BUSINESS OPS					
	Primary General Other (specify) ▼		2500.03				
-	Full Name (Last, First, Middle Initial) MR ERIC MCPHERSON		Date of Receipt				
	Mailing Address 15008 EAGLEPARK	0 6 1 8 2 0 1 1					
	City	State Zip Code	Transaction ID: INCA101186				
	LITHIA	FL 33547	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	12.50				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	E				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	325.00				
-	Full Name (Last, First, Middle Initial) CRAIG MEARS		Date of Receipt				
	Mailing Address 106 MEADOWLAKE	СТ	0 6 / Y Y Y Y 0 6 2 0 1 1				
	City	State Zip Code	Transaction ID: INCA101378				
	HENDERSONVILLE FEC ID number of contributing federal political committee.	TN 37075	Amount of Each Receipt this Period 50.00				
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP SALES					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	650.00				
Γ	SUBTOTAL of Receipts This Page (optional)	1	254.81				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 308 / 434           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	erson for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.I	k.a. Medco Health PAC)
∠ A.	Full Name (Last, First, Middle Initial) MRS WENDY MELLO	Date of Receipt	
	Mailing Address 5147 BLUE SPRUCE I	M M / D D / Y Y Y Y 06 18 2011	
	City	State Zip Code	Transaction ID: INCA100855
	YPSILANTI	MI 48197	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MKTING & STRATEGIC ANA	
	Receipt For:	Aggregate Year-to-Date	
	Primary     General       Other (specify) ▼	260.00	
– В.	Full Name (Last, First, Middle Initial) MS LAURA MENVILLE		Date of Receipt
	Mailing Address 23 UNION HILL RD	0 6 1 8 Y Y Y Y 0 1 8 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA101222
	MORRIS PLAINS	NJ 07950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	
	Receipt For: Primary General	Aggregate Year-to-Date V	
	Other (specify)	325.00	
- с.	Full Name (Last, First, Middle Initial) MS BARBARA MENZEL		Date of Receipt
	Mailing Address 921 AMARYLLIS AVE		0 6 1 8 Y Y Y Y 0 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100838
	ORADELL	NJ 07649	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUS PLANNING & ADMIN	J
	Receipt For: Primary General	Aggregate Year-to-Date ▼	_
	Other (specify)	325.00	
Γ	SUBTOTAL of Receipts This Page (optional)		70.00
F	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 309 / 434
	· · ·		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Detailed Guinnary Page	
ſ	Any information copied from such Reports and S	Statements may	not be sold or used by any per	son for the purpose of soliciting contributions
N	or for commercial purposes, other than using the	e name and add	dress of any political committee	to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k	.a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) DANETTE MEREDITH	Date of Receipt		
	Mailing Address 600 W 2ND AVE			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: INCA101371
	DERRY	PA	15627	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation		
	Receipt For:		Year-to-Date V	
	Primary General	Aggregate		
	Other (specify)		325.00	
		0 0		
в.	Full Name (Last, First, Middle Initial) MR JEFFREY MESAROS			Date of Receipt
	Mailing Address 15905 KENT CT.			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101025
	ТАМРА	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n	
	MEDCO HEALTH SOLUTIONS	ATTORN	ΙΕΥ	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General	7 iggi oguto		
	Other (specify) <b>v</b>	0 0	325.00	
-	Full Name (Last, First, Middle Initial)			
C.	MR DAN MILKENS			Date of Receipt
	Mailing Address 826 DOWNING STRE	EET		0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101042
	NORTHBROOK	IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing			05.00
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
	Receipt For:		Year-to-Date V	
	Primary General	Aggregate		
	Other (specify)	0 0	325.00	
Γ				
	SUBTOTAL of Receipts This Page (optional)			▶ 75.00
ſ	TOTAL This Period (last page this line number	r only)		
L	I THE THE TOTOL (LAST PAGE THE HUTTIDE	· •···y/ ·····		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 310 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO		ACTION COMMITTEE (a.k.a	. Medco Health PAC)
<b>A</b> .	Full Name (Last, First, Middle Initial) DAVID MILLER	Date of Receipt		
	Mailing Address 7 CLOVER LANE			M         M         /         D         D         /         Y
	City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INCA100788
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABC	n DR RELATIONS	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
в.	Full Name (Last, First, Middle Initial) EDDY MILLER			Date of Receipt
	Mailing Address 450 ARCARO WAY APT: 101			M M / D D / Y Y Y Y 06 / 18 / 2011
	City CORDOVA	State TN	Zip Code 38018	Transaction ID: INCA101352 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	TECHNOLOGY	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
с.	Full Name (Last, First, Middle Initial) MRS KAREN MILLER			Date of Receipt
	Mailing Address 34 MACKENZIE LANE	NORTH		M M / D D / Y Y Y Y 06 18 2011
	City DENVILLE	State NJ	Zip Code 07834	Transaction ID: INCA100780
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n COMPLIANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number o	only)		

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 311 / 434	
	ITEMIZED RECEIPTS		for each category of the	(check only one)	
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	
	Any information copied from such Reports and State or for commercial purposes, other than using the na	ements mag	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full)				
	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL	ACTION COMMITTEE (a.k.a	Medco Health PAC)	
Α.	Full Name (Last, First, Middle Initial) PAMELA MILLER	Date of Receipt			
	Mailing Address 158 SUMMIT AVENUE		06 / 18 / Y Y Y Y 011 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
	City	State	Zip Code	Transaction ID: INCA101242	
	HACKENSACK	NJ	07601	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		55.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n TAIN & COMMUNITY INVES	т	
	Receipt For:	Aggregate	e Year-to-Date 🔻	1	
	Primary General		715.00		
	Other (specify)	0 0	113.00		
В.	Full Name (Last, First, Middle Initial) MR BHUPESH MISTRY			Date of Receipt	
Ь.	Mailing Address 92 REDSTONE DR			0 6 1 8 2 0 1 1	
	City	City State Zip Code			
	PARSIPPANY	NJ	07054	Transaction ID: INCA100797 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNI	n CAL SPECIALIST	_	
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Other (specify) ▼	0 0	325.00		
C.	Full Name (Last, First, Middle Initial) MR DAVID MITCHELL			Date of Receipt	
	Mailing Address 222 WEST 14TH STREE APT. 4B	T		06 / <sup>D</sup> D / <u>Y Y Y Y</u> 06 18 2011	
	City	State	Zip Code	Transaction ID: INCA101267	
	NEW YORK	NY	10011	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MKT	n ING & PRODUCT DEV		
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary     General       Other (specify) ▼	0 0	650.00		
	SUBTOTAL of Receipts This Page (optional)			130.00	
	TOTAL This Period (last page this line number on		•		
		יייי) יייייי			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 312 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MONALISA MOHANTY	Date of Receipt	
	Mailing Address 1574 WHITMAR PLAC	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA101350
	MEMPHIS	TN 38120	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR MARKETING	
	Receipt For:	Aggregate Year-to-Date V	
	Other (specify) ▼	325.00	
- B.	Full Name (Last, First, Middle Initial) MS JULIANA MOLEK		Date of Receipt
	Mailing Address 8620 LAKE RILEY DR	M M / D D / Y Y Y Y 06 18 2011	
	City	State Zip Code	Transaction ID: INCA100928
	<u>CHANHASSEN</u>	MN 55317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR SPECIAL MARKETS	
	Receipt For: Primary General	Aggregate Year-to-Date ▼ 650.00	
_	Other (specify) <b>v</b>		
C.	Full Name (Last, First, Middle Initial) ROBERT MOLONEY		Date of Receipt
	Mailing Address 24 ABBINGTON TERF	ACE	M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA101284
	GLEN ROCK	NJ 07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
[	SUBTOTAL of Receipts This Page (optional)	l	100.00
ŀ			
	TOTAL This Period (last page this line number	опіу) 🕨	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 313 / 434           (check only one)         X           X         11a         11b         11c         12					
	Any information copied from such Reports and St or for commercial purposes, other than using the	13     14     15     16     17       for the purpose of soliciting contributions olicit contributions from such committee.						
<b>A</b> .	Full Name (Last, First, Middle Initial) MR ERICK MONCAYO	Date of Receipt						
	Mailing Address 404 HAMILTON AVE	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1						
	City	State Zip Code	Transaction ID: INCA100803					
	GLEN ROCK	NJ 07452	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL THERAPEUTICS						
	Receipt For:	Aggregate Year-to-Date V						
	Primary General Other (specify) ▼							
в.	Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE		Date of Receipt					
	Mailing Address 1320 BRONCO CIR	06 / Y Y Y Y 018 2011						
	City	State Zip Code	Transaction ID: INCA100937					
	WARRINGTON	PA 18976	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY						
	Receipt For: Primary General	Aggregate Year-to-Date 🔻						
	Other (specify) ▼	325.00						
с.	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY		Date of Receipt					
	Mailing Address 86 WELLINGTON AVE	NUE	M         M         /         D         D         /         Y					
	City	State Zip Code	Transaction ID: INCA100769					
	SHORT HILLS FEC ID number of contributing	NJ 07078	Amount of Each Receipt this Period					
	federal political committee.	C	192.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	me of Employer DCO HEALTH SOLUTIONS Occupation GENL C-SEC-SVP PHARM STRAT SO						
	Receipt For: Primary General	Aggregate Year-to-Date 🔻						
	Other (specify) ▼	2496.00						
	SUBTOTAL of Receipts This Page (optional)	•	242.00					
	TOTAL This Period (last page this line number of	only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 314 / 434         (check only one)				
Γ	Any information copied from such Reports and St or for commercial purposes, other than using the	n for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P						
۷ A.	Full Name (Last, First, Middle Initial) MS THERESA MORMILE	Date of Receipt					
	Mailing Address 59 VALLEY VIEW TER	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1					
	City	State Zip Code	Transaction ID: INCA101144				
	MONTVALE	NJ 07645	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE					
	Receipt For:	Aggregate Year-to-Date 🔻					
	Other (specify) ▼						
- В.	Full Name (Last, First, Middle Initial) MR CRAIG MORRIS		Date of Receipt				
	Mailing Address N 49 W 25648 MCKER	0 6 1 8 2 0 1 1					
	City	State Zip Code	Transaction ID: INCA100971				
	PEWAUKEE	WI 53072	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR CLINICAL SVCS					
	Receipt For:	Aggregate Year-to-Date V	_				
	Other (specify) ▼	650.00					
– C.	Full Name (Last, First, Middle Initial) JACQUELINE MORRIS		Date of Receipt				
	Mailing Address 750 COLUMBUS AVE APT 06S		0 6 / D D / Y Y Y Y 2 0 1 1				
	City	State Zip Code	Transaction ID: INCA101331				
	NEW YORK	NY 10025	_ Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR INT'L BUSINESS DEV					
	Receipt For: Primary General	Aggregate Year-to-Date ▼					
	Other (specify) ▼	325.00					
ſ	SUBTOTAL of Receipts This Page (optional)	·····	125.00				
F	TOTAL This Period (last page this line number of	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 315 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17					
	Any information copied from such Reports and St or for commercial purposes, other than using the	n for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P							
⊻ A.	Full Name (Last, First, Middle Initial) MR RICHARD MOUNTJOY	Date of Receipt						
	Mailing Address 2 STONEBRIDGE RD		06 / D D / Y Y Y Y 02011					
	City	State Zip Code	Transaction ID: INCA101187					
	SPARTA	NJ 07871	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	20.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC						
	Receipt For:	Aggregate Year-to-Date ▼						
	Primary General Other (specify) ▼							
– В.	Full Name (Last, First, Middle Initial) MICHELE MUCCI		Date of Receipt					
	Mailing Address 779 OLD MILL ROAD	0 6 1 8 2 0 1 1						
	City	State Zip Code	Transaction ID: INCA101356					
	FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL						
	Receipt For: Primary General	Aggregate Year-to-Date ▼						
	Other (specify)	325.00						
– C.	Full Name (Last, First, Middle Initial) MR PHILLIP MUELLER		Date of Receipt					
	Mailing Address 16329 RIVERBIRCH D	RIVE	06 18 2011					
	City	State Zip Code	Transaction ID: INCA101026					
	MARYSVILLE	OH 43040	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	ame of Employer EDCO HEALTH SOLUTIONS Occupation DIR CLINICAL SVCS						
	Receipt For: Primary General	Aggregate Year-to-Date ▼						
	Other (specify)	325.00						
	SUBTOTAL of Receipts This Page (optional)		70.00					
F	TOTAL This Period (last page this line number of	only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 316 / 434         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR ROBERT MULLER	Date of Receipt		
	Mailing Address 69 FERN PLACE			0 6 / D D / Y Y Y Y 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101160
	PARAMUS	NJ	07652	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n I BUS CLIENT ENROLLMN	т
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0.0	650.00	
в.	Full Name (Last, First, Middle Initial) MRS KATHLEEN MURPHY			Date of Receipt
	Mailing Address 206 TARRYTOWN DF	RIVE		M M / D D / Y Y Y Y 06 18 2011
	City State		Zip Code	Transaction ID: INCA101164
	RICHMOND	VA	23229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ACCT MGMT OPS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0.0	325.00	]
C.	Full Name (Last, First, Middle Initial) MS BECKY NAGLE	1		Date of Receipt
	Mailing Address 64 WALTER AVE			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100845
	HASBROUCK HEIGHTS	NJ	07604	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	<sup>n</sup> ICAL SVCS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 650.00	1
1	Other (specify)	0.0		
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 317 / 434         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17				
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions o solicit contributions from such committee.						
	MEDCO HEALTH SOLUTIONS INC. F	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N						
Α.	Full Name (Last, First, Middle Initial) MR ANDREW NANICK Mailing Address 220 LAUREL BAY DR			Date of Receipt				
		06 18 2011						
		State	Zip Code	Transaction ID: INCA100850				
	MURRELLS INLET FEC ID number of contributing federal political committee.	SC C	29576	Amount of Each Receipt this Period				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on CLINICAL SVCS					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]				
- B.	Full Name (Last, First, Middle Initial) MS BARBARA NEAVERTH Mailing Address PO BOX 523	I		Date of Receipt				
			7	06 18 2011				
	City SUGAR LOAF	State NY	Zip Code 10981	Transaction ID: INCA100822 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on BUSINESS REQUIREMENT	s				
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 325.00	]				
- C.	Full Name (Last, First, Middle Initial) BRIAN NEMIROFF	I		Date of Receipt				
	Mailing Address 335 VILLAGE PLACE			M M / D D / Y Y Y Y 06 / 18 / 2011				
	City <u>WYCKOFF</u>	State NJ	Zip Code 07481	Transaction ID: INCA101329 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on ORG DEV					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00					
ſ	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) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 318 / 434           (check only one)
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) CHRISTIAN NICKERSON	Date of Receipt		
	Mailing Address 20 MELVILLE ROAD			M         M         /         D         D         /         Y
		State	Zip Code	Transaction ID: INCA101327
	PRINCETON JCT FEC ID number of contributing federal political committee.	NJ C	08550	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E		G
	Receipt For: Primary General Other (creative)	Aggregate	Year-to-Date ▼ 325.00	1
	Other (specify)	0 0	0 0 0 0 0 0 0	1
В.	Full Name (Last, First, Middle Initial) MR MICHAEL NICODEMO			Date of Receipt
	Mailing Address 407 MEER AVE	M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: INCA101192
	WYCKOFF FEC ID number of contributing federal political committee.	C	07481	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date  650.00	]
C.	Full Name (Last, First, Middle Initial) MS ARLENE NOLAN			Date of Receipt
•	Mailing Address 319 BOGERT AVENUE			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100886
	RIDGEWOOD FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAN		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	]
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number of	only)		

l	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Statomanta mai	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 319 / 434           (check only one)
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	MEDCO HEALTH SOLUTIONS INC.	a. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN	Date of Receipt		
	Mailing Address 45 DAVIS ROAD			0 6 / D D / Y Y Y Y 0 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100975
	<u>SPARTA</u>	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		38.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL THERAPEUTICS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	494.00	
- В.	Full Name (Last, First, Middle Initial) MS JANINE NOWATZKY			Date of Receipt
	Mailing Address 24 CHEROKEE TRAI	L		M         /         D         D         Y
	City State		Zip Code	Transaction ID: INCA101043
	OAKLAND	NJ	07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n NG & PRODUCT DEV	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	390.00	]
- C.	Full Name (Last, First, Middle Initial) DENISE O'CALLAGHAN	1		Date of Receipt
	Mailing Address 4 HIGHLAND AVE P.O. BOX 408			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101322
	PEAPACK	NJ	07977	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	650.00	
ſ	SUBTOTAL of Receipts This Page (optional) .			118.00
	TOTAL This Period (last page this line number		•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $320 / 434$ (check only one)(check only one)X11a11b1314151617on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	Iress of any political committee to	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) MR ROBERT O'CONNELL Mailing Address 12001 PEONY CT			Date of Receipt
	01	01-11-	7'- 0 - 1-	06 18 2011
	City TAMPA	State FL	Zip Code 33635	Transaction ID: INCA100881 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR SEC		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	]
B.	Full Name (Last, First, Middle Initial) SUSAN O'CONNOR Mailing Address 5 HICKORY DRIVE			Date of Receipt
		06 18 2011		
	City	State	Zip Code	Transaction ID: INCA101333
	NANUET FEC ID number of contributing federal political committee.	C	10954	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR M		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 325.00	]
C.	Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER			Date of Receipt
	Mailing Address 6 PARK DR SOUTH			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101174
	RYE FEC ID number of contributing federal political committee.	NY C	10580	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For: Primary General Other (specify) ▼	- 1 · · · · · · · · · · · · · · · · · ·	Year-to-Date 650.00	]
	SUBTOTAL of Receipts This Page (optional) .	•		100.00
	TOTAL This Period (last page this line number	r only)	I	

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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 321 / 434		
	ITEMIZED RECEIPTS		for each category of the			
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$		
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	on for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial)					
	Mailing Address 274 E FRANKLIN TPKE	M         M         /         D         D         /         Y				
	City	State	Zip Code	Transaction ID: INCA101118		
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	on CUREMENT & INVENTORY			
	Receipt For:	Aggregate	e Year-to-Date V	7		
	Primary General		650.00	1		
	Other (specify) <b>v</b>	0 0	650.00	]		
В.	Full Name (Last, First, Middle Initial) MR NEVIN OKAY			Date of Receipt		
	Mailing Address 733 RIDGE RD	M · M         /         D · D         Y         Y · Y         <				
	City	State	Zip Code	Transaction ID: INCA100829		
	KINNELON	NJ	07405	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on TRC OPS PROD DEV			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼	0 0	325.00	]		
C.	Full Name (Last, First, Middle Initial) MR BRYAN OLENIK			Date of Receipt		
	Mailing Address 22212 N. 36TH ST			0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101157		
	PHOENIX	AZ	85050	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		12.50		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	ARM PRACTICE			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼	0 0	325.00	]		
	SUBTOTAL of Receipts This Page (optional)			87.50		
	TOTAL This Period (last page this line number of					
	INTAL THIS I CHOU (IAST PAYE THIS INTE HUTTIDE OF	( ( <b>y</b> )	·····			

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 322 / 434				
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)				
				X 11a 11b 11c 12				
				13 14 15 16 17				
	Any information copied from such Reports and St	atements ma	ay not be sold or used by any perso	on for the purpose of soliciting contributions				
	or for commercial purposes, other than using the	name and ac	dress of any political committee to	solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)	NAME OF COMMITTEE (In Full)						
	> MEDCO HEALTH SOLUTIONS INC. P	a. Medco Health PAC)						
	Full Name (Last, First, Middle Initial)							
Α.	MRS SUE OLIVER	Date of Receipt						
	Mailing Address 11 LEE DRIVE							
				06 18 2011				
	City	State	Zip Code	Transaction ID: INCA101126				
	NORTH HALEDON	NJ	07508	Amount of Each Receipt this Period				
	FEC ID number of contributing			50.00				
	federal political committee.	С		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio						
		EXEC D	IR TECHNOLOGY					
	Receipt For:	Aggregat	e Year-to-Date 🔻					
	Primary General		050.00	1				
	Other (specify)		650.00					
				-				
	Full Name (Last, First, Middle Initial)							
В.	MS CLAUDINE OLSEN			Date of Receipt				
	Mailing Address 4 HIGHGATE CT			M M / D D / Y Y Y Y				
				06 18 2011				
	City	State	Zip Code	Transaction ID: INCA101167				
	SUFFERN	NY	10901	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		25.00				
	·							
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio						
		NATL A	CCT EXEC					
	Receipt For:	Aggregat	e Year-to-Date 🔻					
	Primary General		005 00	1				
	Other (specify)		325.00					
	Full Name (Last, First, Middle Initial)							
C.	MS PATRICE OLSON			Date of Receipt				
	Mailing Address 9933 TOLEDO DRIVE	NORTH		M M / D D / Y Y Y Y				
				06 18 2011				
	City	State	Zip Code	Transaction ID: INCA101183				
	BROOKLYN PARK	MN	55443	Amount of Each Receipt this Period				
	FEC ID number of contributing			05.00				
	federal political committee.	C		25.00				
Name of Employer MEDCO HEALTH SOLUTIONS		Occupatio						
		SR DIR	ACCT MGMT					
	Receipt For:	Aggregat	e Year-to-Date 🔻					
	Primary General		325.00	1				
	Other (specify)	0 0	323.00					
	SUBTOTAL of Receipts This Page (optional)			100.00				
	· · · · · · · · · · · · · · · · · · ·			-				
	TOTAL This Period (last page this line number of	only)						
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 323 / 434         (check only one)
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	Medco Health PAC)	
Α.	Full Name (Last, First, Middle Initial) MS CYNTHIA O'NEILL	Date of Receipt	
	Mailing Address 69 SUMMIT AVE		0 6 / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1
	City MONTVALE	State Zip Code NJ 07645	Transaction ID: INCA101104 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS & INSTALLATION SVCS	-
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	650.00	
В.	Full Name (Last, First, Middle Initial) ALEXANDER ONIK		Date of Receipt
	Mailing Address 1 SCHINDLER CT		M M / D D / Y Y Y Y 06 18 2011
		State Zip Code	Transaction ID: INCA101276
	UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	NJ 07458	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date  325.00	
C.	Full Name (Last, First, Middle Initial) MS NATALYA ONIK		Date of Receipt
-	Mailing Address 1 SCHINDLER CT		M M / D D / Y Y Y Y 06 18 2011
		State Zip Code	Transaction ID: INCA101011
	UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	NJ 07458	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BIAC SYSTEMS SOLUTIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)	•••••	100.00
	TOTAL This Period (last page this line number or	nly)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Sta	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 324 / 434           (check only one)         Image: Constraint of the second sec
	or for commercial purposes, other than using the r         NAME OF COMMITTEE (In Full)         MEDCO HEALTH SOLUTIONS INC. Po	solicit contributions from such committee.		
Α.	Full Name (Last, First, Middle Initial) MR KIPP OTTLEY Mailing Address 672 PETWORTH CT	Date of Receipt		
				06 18 2011
	City POWELL	State OH	Zip Code 43065	Transaction ID: INCA100938
	FEC ID number of contributing federal political committee.	C	43003	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR HLT	n H CARE OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
в.	Full Name (Last, First, Middle Initial) MS DAWN PAGANO Mailing Address 185 PASCACK ROAD			Date of Receipt
		01-11-	7'	06 18 2011
	City PARK RIDGE	State NJ	Zip Code 07656	Transaction ID: INCA101106 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BIAC		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]
C.	Full Name (Last, First, Middle Initial) MR RICHARD PAGANO			Date of Receipt
	Mailing Address 185 PASCACK RD			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101100
	PARK RIDGE	NJ	07656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	BUSINESS REQUIREMENT	s
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number o	only)		
	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule( for each category of the Detailed Summary Page		
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ſ	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or used by any name and address of any political commi	13     14     15     16     17       / person for the purpose of soliciting contributions titee to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F			
۷ A.	Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE		Date of Receipt	
	Mailing Address 12 MILLBROOK COUF	M M / D D / Y Y Y Y 06 18 2011		
	City	State Zip Code	Transaction ID: INCA100998	
	LIVINGSTON FEC ID number of contributing federal political committee.	NJ 07039	Amount of Each Receipt this Period 50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP RETIREE SOLUTIONS MKT	rG	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.0	0	
- B.	Full Name (Last, First, Middle Initial) JULIE PAK Mailing Address 417 BRITTANY DRIVE		Date of Receipt	
	-	06 18 2011		
	City WAYNE	State Zip Code NJ 07470	Transaction ID: INCA101354 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP STRATEGIC MKT DEV		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.0	0	
- C.	Full Name (Last, First, Middle Initial) MR RICHARD PALOMBO		Date of Receipt	
	Mailing Address 19 E. HOLLYWOOD L	ANE	06 / 18 / Y Y Y Y 011 / 2011	
	City <u>BEESLEY'S POINT</u>	State Zip Code NJ 08223	Transaction ID: INCA101228 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARMACY REGULAT	ORY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.0	0	
ſ	SUBTOTAL of Receipts This Page (optional)		100.00	
Ī	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 326 / 434           (check only one)         11c         12           X         11a         11b         12
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to s	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.
		OLITICAL ACTION COMMITTEE (a.k.a.	
۷ A.	Full Name (Last, First, Middle Initial) MR JUN PARK		Date of Receipt
	Mailing Address 2843 HONEYSUCKLE	LANE	0 6 1 8 Y Y Y Y 0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101265
	HILLIARD	OH 43026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS PROCESS CHAMPION	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	325.00	
- B.	Full Name (Last, First, Middle Initial) MS GIRA PATEL		Date of Receipt
	Mailing Address 5 FOXHILL RUN		0 6 1 8 Y Y Y Y 0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100992
	MONMOUTH JUNCTION	NJ 08852	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- C.	Full Name (Last, First, Middle Initial) MR JAY PATEL		Date of Receipt
	Mailing Address 14 BROWNSTONE TE	RRACE	M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA101259
	HAWTHORNE	NJ 07506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
ſ	SUBTOTAL of Receipts This Page (optional)	▶	62.50
	TOTAL This Period (last page this line number of	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER:         PAGE 327 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be name and address o	e sold or used by any perso f any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	> MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTIO	N COMMITTEE (a.k.a	a. Medco Health PAC)
<i>А</i> .	Full Name (Last, First, Middle Initial) MR JITENDRE PATEL	Date of Receipt		
	Mailing Address 81 GLESS AVE			M M / D D / Y Y Y Y 06 18 2011
	City	State Zi	p Code	Transaction ID: INCA101182
	BELLEVILLE	NJ 0	7109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL S	PECIALIST	
	Receipt For:	Aggregate Year-t	o-Date 🔻	_
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>		325.00	
В.	Full Name (Last, First, Middle Initial) MR MATTHEW PATELLA			Date of Receipt
	Mailing Address 30 TAM O SHANTER	DRIVE		0 6 / D D / Y Y Y Y 0 8 / 2 0 1 1
	City	State Zi	p Code	Transaction ID: INCA100825
	MAHWAH	NJ 07	7430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACC	T EXEC	
	Receipt For: Primary General	Aggregate Year-to	o-Date 🔻	_
	Other (specify) ▼		650.00	
С.	Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS	·		Date of Receipt
	Mailing Address 2780 FOLKSTONE RC	DAD		M M / D D / Y Y Y Y 06 18 2011
	City		p Code	Transaction ID: INCA100858
	COLUMBUS	<u>OH 4</u> ;	3220	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
	Receipt For: Primary General	Aggregate Year-te	o-Date 🔻	_
	Other (specify) ▼		650.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:     PAGE 328 / 434       (check only one)     X       X     11a       11b     11c       12
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F		
Α.	Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI	Date of Receipt	
	Mailing Address 211 WILTSIE COURT		06 / D D / Y Y Y Y 02011
	City	State Zip Code	Transaction ID: INCA100954
	WYCKOFF	NJ 07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	_
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	390.00	
В.	Full Name (Last, First, Middle Initial) MERRI PENDERGRASS, MD		Date of Receipt
	Mailing Address 3201 QUEENSBURY V	NAY WEST	M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA101341
	COLLEYVILLE	TX 76034	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATIONAL PRACTICE LEADER	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
- C.	Full Name (Last, First, Middle Initial) MR VICTOR PERINI		Date of Receipt
•	Mailing Address 9304 GROVE PARK C	OVE	0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101344
	GERMANTOWN	TN 38139	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP INFUSION OPS	
	Receipt For: Primary General Other (specify) $\blacksquare$	Aggregate Year-to-Date  650.00	
	SUBTOTAL of Receipts This Page (optional)	·····	130.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 329 / 434           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	. Medco Health PAC)	
۷ A.	Full Name (Last, First, Middle Initial) JIMMY PERREN		Date of Receipt
	Mailing Address 1250 BRAY PARK DR	06 18 Y Y Y Y 011 0 0 1 1	
	City	State Zip Code	Transaction ID: INCA101373
	COLLIERVILLE	TN 38017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP REGULATORY COMPLIANCE	
	Receipt For:	Aggregate Year-to-Date V	
	Primary     General       Other (specify) ▼	975.00	]
- В.	Full Name (Last, First, Middle Initial) MR NATHAN PETERSON		Date of Receipt
	Mailing Address 1520 PEMBROKE PAS	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1	
	City	State Zip Code	Transaction ID: INCA100967
	CHANHASSEN	MN 55317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
	Receipt For:	Aggregate Year-to-Date V	
	Primary     General       Other (specify) ▼	325.00	
- с.	Full Name (Last, First, Middle Initial) MR THOMAS PETTYES		Date of Receipt
	Mailing Address 8522 UPLAND LN NO	RTH	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100912
	MAPLE GROVE	MN 55311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Γ	SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
F	TOTAL This Period (last page this line number		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 330 / 434           (check only one)			
	Any information copied from such Reports and S or for commercial purposes, other than using the	e name and ad	dress of any political committee to	solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. F	> MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
Α.	Full Name (Last, First, Middle Initial) MARTINE PFLIEGER						
	Mailing Address 44 HENRY TERRACE	M         M         /         D         D         /         Y					
	City	State	Zip Code	Transaction ID: INCA101307			
	LINCOLN PARK	NJ	07035	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR ATT					
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	0 0	325.00	]			
В.	Full Name (Last, First, Middle Initial) MR LOUIS PICONE	•		Date of Receipt			
	Mailing Address 37 TAMARACK DRIVE	1		M M / D D / Y Y Y Y 06 18 2011			
	-		Zip Code	Transaction ID: INCA101224			
	SUCCASUNNA	NJ	07876	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	on CHNOLOGY				
		Aggregate	e Year-to-Date 🔻	_			
	Primary     General       Other (specify) ▼	0 0	325.00				
C.	Full Name (Last, First, Middle Initial) MR THOMAS PIERCE	•		Date of Receipt			
	Mailing Address 10297 E. LAKE DR.			M · M         /         D · D         Y         Y · Y · Y         Y			
	City	State	Zip Code	Transaction ID: INCA101296			
	ENGLEWOOD	CO	80111	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP LAB	on OR RELATIONS				
	Receipt For:	Aggregate	e Year-to-Date 🔻	_			
	Primary     General       Other (specify) ▼	0 0	650.00				
	SUBTOTAL of Receipts This Page (optional)			100.00			
	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 331 / 434
	· · ·		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Detailed Summary Fage	
	Any information copied from such Reports and Stat	tements ma	v not be sold or used by any pers	on for the purpose of soliciting contributions
	or for commercial purposes, other than using the na	ame and ad	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
				Madaa Llaalth DAC)
	MEDCO HEALTH SOLUTIONS INC. PC		ACTION COMMITTEE (a.K.a	a. Meuco Health PAC)
Α.	Full Name (Last, First, Middle Initial) DR PAGE PIGG	Date of Receipt		
<b>~</b> .	Mailing Address 9297 ANGLER TRL	· · · · · · · · · · · · · · · · · · ·		
	Maining Address 9297 ANGLER TRL	06 18 2011		
	City	State	Zip Code	Transaction ID: INCA100964
	MECHANICSVILLE	VA	•	
	MECHANICSVILLE	VA	23116	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.			
	Nome of Employer	Occupatio	~~~~~	_
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		
		-		
	Receipt For:	Aggregate	e Year-to-Date	_
	Primary General		325.00	
	Other (specify)	0 0		
_	Full Name (Last, First, Middle Initial)			
В.	MS JUDITH PLATKIN			Date of Receipt
	Mailing Address 29 BLACKWELL AVE			
				06 18 2011
	City	State	Zip Code	Transaction ID: INCA100782
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing	<b>^</b>		192.30
	federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		2499.90	
	Other (specify)			
_	Full Name (Last, First, Middle Initial)			
C.	MR RICHARD PONESSE			Date of Receipt
	Mailing Address 10 DISTILLERY PATH			06 18 2011
	<u></u>	01-1-	Zin Code	
	City	State	Zip Code	Transaction ID: INCA101202
	NEWBURGH	NY	12550	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.			
	Name of Employer	Occupatio		
	Name of Employer ACCREDO HEALTH GROUP	VP PRIC		
	Receipt For:	1		
	Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)		650.00	
				267.30
	SUBTOTAL of Receipts This Page (optional)		······	
	TOTAL This Period (last page this line number or	ıly)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 332 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS JANET PORAT			Date of Receipt
	Mailing Address 5 CRABAPPLE CT	0 6 1 8 Y Y Y Y 0 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100915
	MONSEY	NY	10952	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
- В.	Full Name (Last, First, Middle Initial) MR NEIL PREZIOSO			Date of Receipt
	Mailing Address 10258 WINDSOR WA	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101076
	POWELL	OH	43065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP TR	n C & HEALTHCARE OPS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	650.00	
- C.	Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE			Date of Receipt
	Mailing Address 875 ALEXANDRIA CT			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101024
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP HR		
	Receipt For: Primary General	Aggregate	e Year-to-Date	1
	Other (specify) <b>v</b>		2499.90	
	SUBTOTAL of Receipts This Page (optional)			267.30
	TOTAL This Period (last page this line number	only)		

			I	
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 333 / 434
	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	n for the purpose of soliciting contributions		
	· · · · · · · · · · · · · · · · · · ·	iame and ad	uress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial)     MR ROBERT PRITCHET	Date of Receipt		
	Mailing Address 135 HOLLYBERRY DRI	0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101132
	HOPEWELL JUNCTION	NY	12533	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n TRACT ADMINISTRATOR	-
	Receipt For:		e Year-to-Date V	-
	Primary General	Ayyreyale		
	Other (specify)	0 0	325.00	
в.	Full Name (Last, First, Middle Initial) BARBARA S. PROSSER			Date of Receipt
	Mailing Address 8A HEMLOCK ROAD			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA101418
	COLUMBIA	NJ	07832	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL MGMT & SVCS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	
с.	Full Name (Last, First, Middle Initial) MR JASON PROULX			Date of Receipt
	Mailing Address 3601 LEANNE DRIVE			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101223
	FLOWER MOUND	ТХ	75022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP OPS	n PLANNING	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		650.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
			P	
	TOTAL This Period (last page this line number or	nly)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 334 / 434         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and s or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	a. Medco Health PAC)		
⊻ A.	Full Name (Last, First, Middle Initial) MR MARK PROULX	Date of Receipt		
	Mailing Address 20 BRANDY RIDGE F	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101216
	SPARTA FEC ID number of contributing	NJ C	07871	Amount of Each Receipt this Period
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF O	n IF OPERATIONS	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary     General       Other (specify) ▼	0 0	2500.03	
– В.	Full Name (Last, First, Middle Initial) MS CATHERINE PURDUE			Date of Receipt
	Mailing Address 318 NEWBURY DRIV	/E		M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101159
		PA	15146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n INESS DEV	
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻	
	Other (specify)		325.00	
– C.	Full Name (Last, First, Middle Initial) SYED QUADRI			Date of Receipt
	Mailing Address 6040 KENNEDY BLVI APT 30N	D EAST		M M / D D / Y Y Y Y 06 18 2011
		State	Zip Code	Transaction ID: INCA101208
	WEST NEW YORK FEC ID number of contributing federal political committee.	NJ C	07093	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	
	MEDCO HEALTH SOLUTIONS			_
	Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	]
ſ	SUBTOTAL of Receipts This Page (optional).			242.31
	TOTAL This Period (last page this line number	r only)	·····	

				I	FOR LINE NUMBER: PAGE 335/434
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)	
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a 11b 11c 12
				, ·	13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements ma name and ad	y not be sold or used dress of any political	by any persor committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)				
	MEDCO HEALTH SOLUTIONS INC. P	Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES	Date of Receipt			
	Mailing Address 800 SANDY TRAIL				0 6 / 1 8 / Y Y Y Y 0 1 8 / 2 0 1 1
	City	State	Zip Code		Transaction ID: INCA101240
	KELLER	TX	76248		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR HR	n		
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary General			650.00	
	Other (specify) ▼	0 0	0 0 0 0	0.00	
В.	Full Name (Last, First, Middle Initial) KATHERINE RANDALL				Date of Receipt
	Mailing Address 8774 BRUNSWICK FAI	RMS DRIV	E		M         M         /         D         D         /         Y
	City	State	Zip Code		Transaction ID: INCA101355
	ARLINGTON	TN	38002		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR HR	n		_
	Receipt For:	Aggregate	e Year-to-Date 🔻		_
	Primary General			325.00	
	Other (specify) <b>v</b>	0 0	0 0 0 0 0		
C.	Full Name (Last, First, Middle Initial) MS FRANCES RAO				Date of Receipt
	Mailing Address 19 ROSS ROAD				M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code		Transaction ID: INCA100817
	SCARSDALE	NY	10583		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PRIV			
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Other (specify) ▼		· · · · · · ·	975.00	
	SUBTOTAL of Receipts This Page (optional)			····· •	125.00
	TOTAL This Period (last page this line number o	only)			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 336 / 434         (check only one)
	Any information copied from such Reports and St or for commercial purposes, other than using the	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
∠ A.	Full Name (Last, First, Middle Initial) MRS DOLORES RAPUANO		Date of Receipt
	Mailing Address 57660 BEAVER VALLE	06 / D D / Y Y Y Y 02011	
	City	State Zip Code	Transaction ID: INCA101179
	QUAKER CITY FEC ID number of contributing federal political committee.	OH 43773	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ELIGIBILITY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
– В.	Full Name (Last, First, Middle Initial) MRS MONICA REED Mailing Address 8475 DUNHAM STATIO		Date of Receipt
		06 18 2011	
	City TAMPA	State Zip Code FL 33647	Transaction ID: INCA101019 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROF PRA	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
– C.	Full Name (Last, First, Middle Initial) MS MARGARET REICHENBACHER Mailing Address 26 UNDERWOOD DR		Date of Receipt
	City	State Zip Code	0 6 1 8 2 0 1 1 Transaction ID: INCA101040
	WEST ORANGE FEC ID number of contributing federal political committee.	NJ 07052	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR TECHNOLOGY	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Γ	SUBTOTAL of Receipts This Page (optional)		100.00
	TOTAL This Period (last page this line number of	only)	

SCHEDULE A (FEC Form 3)	$\mathbf{O} \qquad    \mathbf{I} \qquad \mathbf{I} \qquad \mathbf{I}$	FOR LINE NUMBER: PAGE 337 / 434					
ITEMIZED RECEIPTS	Use separate schedule(s)           for each category of the	(check only one)					
	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)							
MEDCO HEALTH SOLUTIONS IN	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N						
Full Name (Last, First, Middle Initial)           MRS HEATHER REIGLE	MRS HEATHER REIGLE						
Mailing Address 10816 BARBADOS	Mailing Address 10816 BARBADOS ISLE DRIVE						
City	State Zip Code	Transaction ID: INCA100819					
	FL 33647	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	25.00					
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CUST SVC						
Receipt For:	Aggregate Year-to-Date ▼						
Primary     General       Other (specify) ▼	325.00						
Full Name (Last, First, Middle Initial) B. MR THOMAS REINCKENS		Date of Receipt					
Mailing Address 204 TOKENEKE R	D	M M / D D / Y Y Y Y 06 18 2011					
City	State Zip Code	Transaction ID: INCA100934					
DARIEN	CT 06820	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BIAC						
Receipt For:	Aggregate Year-to-Date ▼						
Primary     General       Other (specify) ▼	650.00						
Full Name (Last, First, Middle Initial) C. MRS YVETTE RENNIE		Date of Receipt					
Mailing Address 1 RED OAK LANE		M M / D D / Y Y Y Y 06 18 2011					
City	State Zip Code	Transaction ID: INCA100799					
KINNELON	NJ 07405	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		25.00					
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRICING						
Bossint For:	Aggregate Year-to-Date ▼						
Receipt For:							
Primary General Other (specify) ▼	325.00						
Primary General		100.00					

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 338 / 434		
	ITEMIZED RECEIPTS		for each category of the	(check only one)		
	······································		Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	n for the purpose of soliciting contributions				
	MEDCO HEALTH SOLUTIONS INC. PO	. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS	MR JOSEPH REYNOLDS				
	Mailing Address 412 RIVER MEWS LAN	M         /         D         D         /         Y				
	City	State	Zip Code	Transaction ID: INCA101237		
	EDGEWATER	NJ	07020	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		70.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n INESS REQUIREMENTS			
	Receipt For:	_	e Year-to-Date 🔻	1		
	Primary General		910.00	1		
	Other (specify) ▼	0 0	910.00			
в.	Full Name (Last, First, Middle Initial) MS ANGELA RIECK			Date of Receipt		
	Mailing Address 5 EGBERT AVENUE			M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: INCA101346		
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PEF	n RFORMANCE CONSULTING			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼	0 0	325.00	]		
C.	Full Name (Last, First, Middle Initial) MRS JACQUELINE RIMSKY			Date of Receipt		
	Mailing Address 13 HILLCREST ROAD			0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101285		
	TOWACO	NJ	07082	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		-		
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼		325.00	]		
	SUBTOTAL of Receipts This Page (optional)		·····	120.00		
	TOTAL This Period (last page this line number o		· · · ·			
		···· <b>y</b> / ·····				

	or commercial purposes, other than using t NAME OF COMMITTEE (In Full)	he name and address of any political committ	Date of Receipt 0 6 Transaction ID: INCA101068 Amount of Each Receipt this Period 25.00
	MEDCO HEALTH SOLUTIONS INC Full Name (Last, First, Middle Initial) MR WILLIAM RINCON Mailing Address 32 CLINTON VIEW City HEWITT FEC ID number of contributing ederal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	TERRACE State Zip Code NJ 07421 C Occupation DIR BUSINESS REQUIREMENT	Date of Receipt 0 6 Transaction ID: INCA101068 Amount of Each Receipt this Period 25.00
<b>A.</b> <u>1</u> <u>7</u> <u>7</u> <u>7</u> <u>7</u> <u>7</u> <u>7</u>	MR WILLIAM RINCON Mailing Address 32 CLINTON VIEW City HEWITT FEC ID number of contributing ederal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07421	M       M       /       D       /       Y
	City HEWITT FEC ID number of contributing ederal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07421	0 6     1 8     2 0 1 1       Transaction ID: INCA101068       Amount of Each Receipt this Period       25.00
       	HEWITT FEC ID number of contributing ederal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	NJ 07421 C Occupation DIR BUSINESS REQUIREMENT	Amount of Each Receipt this Period 25.00
- f 1 - 	FEC ID number of contributing ederal political committee.         Name of Employer MEDCO HEALTH SOLUTIONS         Receipt For:         Primary       General	Occupation DIR BUSINESS REQUIREMENT	25.00
f - 1 -	ederal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation DIR BUSINESS REQUIREMENT	
-	Receipt For: Primary General	DIR BUSINESS REQUIREMENT	S
F	Primary General	Aggregate Year-to-Date ▼	
		325.00	
	Full Name (Last, First, Middle Initial) ELIZABETH RITCHIE		Date of Receipt
-	Mailing Address 27 DAY RD	M         M         /         D         D         /         Y         Y         Y         Y           0         6         /         1         8         2         0         1         1	
	City PLEASANT VALLEY	State Zip Code CT 06063	Transaction ID: INCA101301
- F	EC ID number of contributing ederal political committee.	C	Amount of Each Receipt this Period
- 1 1	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MARKET STRATEGY	
F	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 650.00	
	Full Name (Last, First, Middle Initial) MS VIRGINIA RIVAS		Date of Receipt
-	Mailing Address 7845 E 5TH ST		0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100785
-	DOWNEY	CA 90241	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C	25.00
_	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS	
F	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	- -
su	BTOTAL of Receipts This Page (optional)		100.00

				1
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 340 / 434
	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR DAVID ROBARGE	Date of Receipt		
	Mailing Address 4565 QUEENSLAND L	M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: INCA100863
	MINNEAPOLIS	MN	55446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on CLINICAL SVCS	
	Receipt For:	-	e Year-to-Date V	-
	Primary General	7.99.094		1
	Other (specify) <b>▼</b>	0 0	325.00	
в.	Full Name (Last, First, Middle Initial) MRS JENNIFER ROBERTS			Date of Receipt
	Mailing Address 1342 DALTON CT			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100903
	FAIRFIELD	OH	45014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	]
C.	Full Name (Last, First, Middle Initial) ERIC ROELOFS			Date of Receipt
	Mailing Address 9 STRATFORD WAY			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101338
	MORRIS PLAINS	NJ	07950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	]
	SUBTOTAL of Receipts This Page (optional)			62.50
	TOTAL This Period (last page this line number of	only)		

				FOR LINE NUMBER: PAGE 341 / 434
	SCHEDULE A (FEC Form 3X)			(check only one)
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and St	atements ma	v not be sold or used by any period	an for the purpose of soliciting contributions
	or for commercial purposes, other than using the	name and ad	dress of any political committee	to solicit contributions from such committee.
				a Madaa Llackh DAO)
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.K.	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO			Date of Receipt
	Mailing Address 855 CLUB MOSS CT.			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100932
	MARIETTA	GA	30068	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	on ENT SYSTEMED	
	Receipt For:		e Year-to-Date V	
	Primary General		2499.90	
	Other (specify)	0 0	2433.30	
в.	Full Name (Last, First, Middle Initial) DAVID ROOT			Date of Receipt
	Mailing Address 212 SPRING BRANCH	ROAD		M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101315
	WAVERLY	VA	23890	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR STA	on ATE GOVERNMENT AFFAI	RS
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	
C.	Full Name (Last, First, Middle Initial) MS DONNA ROSEN			Date of Receipt
0.	Mailing Address 7 RED OAK LANE			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101133
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	on S-CLINICAL TECH	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	650.00	
	SUBTOTAL of Receipts This Page (optional)			267.30
	<b>TOTAL</b> This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 342 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS			Date of Receipt
	Mailing Address 7227 RAMOTH DRIVE	0 6 / D D / Y Y Y Y 0 6 1 8 20 1 1		
	City	State	Zip Code	Transaction ID: INCA100889
	JACKSONVILLE	FL	32226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR FORMULARY CONSULT	ING
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	650.00	]
В.	Full Name (Last, First, Middle Initial) MS LAUREN RUBENSTEIN			Date of Receipt
	Mailing Address 345 WINTHROP DRIV	E		M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101176
	NUTLEY	NJ	07110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n CHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	325.00	
C.	Full Name (Last, First, Middle Initial) MR RICHARD RUBINO			Date of Receipt
	Mailing Address 3 APACHE DRIVE			06 18 Y Y Y Y 2011
	City	State	Zip Code	Transaction ID: INCA101130
	OAKLAND	NJ	07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		193.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	ANCE & CHIEF FIN OFFCR	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-
	Other (specify) ▼	0 0	2509.00	]
	SUBTOTAL of Receipts This Page (optional)			268.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 343 / 434           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
. Z	Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK			Date of Receipt
	Mailing Address 13910 MCTYRES CO	M M / D D / Y Y Y Y 06 18 2011		
	City	State	Zip Code	Transaction ID: INCA100956
	MIDLOTHIAN	VA	23112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLIN	n ICAL MGMT & SVCS	
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻	_
	Other (specify) ▼	0 0	650.00	
	Full Name (Last, First, Middle Initial) MS KAREN RUSSELL	1		Date of Receipt
	Mailing Address 148 CLUBHOUSE DR			0 6 1 8 Y Y Y Y 0 6 1 8 0 1 1
	City	State	Zip Code	Transaction ID: INCA100811
	WEST COLUMBIA	SC	29172	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CLINICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date <b>V</b> 325.00	]
_	Full Name (Last, First, Middle Initial) MS KATHERYN RUSSI			Date of Receipt
	Mailing Address 5965 VILLAGE CIRCL	.E		0 6 / D D / Y Y Y Y 0 6 18 2011
	City	State	Zip Code	Transaction ID: INCA100832
	JOHNSTON	IA	50131	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 650.00	]
Γ	SUBTOTAL of Receipts This Page (optional)	1		125.00

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 344 / 434
	· · ·		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions of solicit contributions from such committee.		
			••	
	MEDCO HEALTH SOLUTIONS INC. F		ACTION COMMITTEE (a k a	Medco Health PAC)
	/			
A.	Full Name (Last, First, Middle Initial) MR ANTHONY RUSSO			Date of Receipt
	Mailing Address 66 FINCH RD			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101082
	RINGWOOD	NJ	07456	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		1
	Receipt For:	1 1	e Year-to-Date V	
	Primary General	Aggregate		1
	Other (specify) ▼		650.00	
				1
- В.	Full Name (Last, First, Middle Initial) MS JENNIFER RUSSO	•		Date of Receipt
5.	Mailing Address 35 DEAN ST.			
				06 18 2011
	City	State	Zip Code	Transaction ID: INCA101256
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing	•		25.00
	federal political committee.	C		
	Name of Employer	Occupatio	n	_
	Name of Employer MEDCO HEALTH SOLUTIONS		 MARKETING	
	Receipt For:	Aggregate	e Year-to-Date	_
	Primary General	, iggi oguto		1
	Other (specify)		325.00	
_				
~	Full Name (Last, First, Middle Initial)			Date of Dessint
C.	MR JESSE RUZICKA Mailing Address 334 MORRIS AVE			Date of Receipt
	MUKKIS AVE			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101257
	BOONTON	NJ	07005	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n	-
		NATL AC	CT EXEC	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		390.00	1
	Other (specify)	0 0		1
г				
				105.00
	SUBTOTAL of Receipts This Page (optional)			
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 345 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	Medco Health PAC)	
۷ A.	Full Name (Last, First, Middle Initial) MS MARY RYAN	Date of Receipt	
	Mailing Address 456 RICHMOND AVEN	IUE	06 / D / Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA101124
	MAPLEWOOD	NJ 07040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.34
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHARMACY REGULATORY	_
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	1018.42	
- B.	Full Name (Last, First, Middle Initial) MRS CYNTHEA RYDER		Date of Receipt
	Mailing Address 74 CHOCTAW TRAIL		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100798
	RINGWOOD	NJ 07456	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR E-COM STRAT & DELIV	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
- C.	Full Name (Last, First, Middle Initial) MISS CYNTHIA RYLANDS		Date of Receipt
	Mailing Address 4836 MIDDLE RD		M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA101158
	ALLISON PARK	PA 15101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS REQUIREMENTS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
ſ	SUBTOTAL of Receipts This Page (optional)		128.34
ľ	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 346 / 434           (check only one)         11a           X         11a         11b           13         14         15           16         17
	NAME OF COMMITTEE (In Full)           MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) ANTOINE SAAD Mailing Address 22 FRANKLIN DR	Date of Receipt		
	Maining Address 22 FRANKLIN DR			06 18 2011
	City	State NY	Zip Code	Transaction ID: INCA101280
	MAHOPAC FEC ID number of contributing federal political committee.	C	10541	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n HNOLOGY	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
в.	Full Name (Last, First, Middle Initial) MRS SARA SABIN Mailing Address 133 MOUNTAIN ROAD	)		Date of Receipt
		06 18 2011		
	City	State	Zip Code	Transaction ID: INCA100990
	CORNWALL-ON-HUDSON FEC ID number of contributing federal political committee.	C	12520	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	_ · · · · _ · · ·	CCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
с.	Full Name (Last, First, Middle Initial) MR RYAN SADLER			Date of Receipt
	Mailing Address 247 8TH ST. NE APT 202			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101324
	WASHINGTON FEC ID number of contributing federal political committee.	C	20002	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR GO	n /ERNMENT AFFAIRS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P Full Name (Last, First, Middle Initial)	name and address of any political	hedule(s) y of the ry Page I by any person f committee to so	licit contributions from such committee.
Α.	CHRISTOPHER SANDERS Mailing Address 7475 MINK HOLLOW F	Date of Receipt		
				06 18 2011
	City HIGHLAND	State Zip Code MD 20777	-	Transaction ID: INCA101337
	FEC ID number of contributing federal political committee.	MD 20777	•	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR CAOR Aggregate Year-to-Date		
	Primary General Other (specify) ▼		325.00	
в.	Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE Mailing Address 7 AHERN WAY			Date of Receipt
	City	State Zip Code		0 6 1 8 2 0 1 1 Transaction ID: INCA100993
	WEST ORANGE	NJ 07052	-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR ENTERPRISE BL Aggregate Year-to-Date	JS INTELLIG	
	Primary General Other (specify) ▼		325.00	
с.	Full Name (Last, First, Middle Initial) MR MATTHEW SARDY			Date of Receipt
	Mailing Address 230 FAIRFIELD AVE.			M         M         /         D         D         /         Y
	City	State Zip Code		Transaction ID: INCA100867
	RIDGEWOOD FEC ID number of contributing federal political committee.	NJ 07450		Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date V	650.00	
	SUBTOTAL of Receipts This Page (optional)		······ <b>Þ</b>	100.00
Ī	TOTAL This Period (last page this line number of	nly)		

	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 348 / 434				
	ITEMIZED RECEIPTS	for each category of the	(check only one)				
		Detailed Summary Page	X 11a 11b 11c 12				
	[		13 14 15 16 17				
	Any information copied from such Reports and Sta	atements may not be sold or used by any perso	n for the purpose of soliciting contributions				
	or for commercial purposes, other than using the r	name and address of any political committee to	solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)						
	> MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	. Medco Health PAC)				
		· ·	,				
	Full Name (Last, First, Middle Initial)						
Α.	MS BETH SAVARE		Date of Receipt				
	Mailing Address 27 JONES LN	M M / D D / Y Y Y Y					
			06 18 2011				
	City	State Zip Code	Transaction ID: INCA101127				
	BLAIRSTOWN	NJ 07825	Amount of Each Receipt this Period				
	FEC ID number of contributing		05.00				
	federal political committee.	C	25.00				
	·						
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation					
		SR DIR PHARM OPS					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General						
	Other (specify)	325.00					
	Full Name (Last, First, Middle Initial)						
В.	MR MITCHELL SCHERF		Date of Receipt				
	Mailing Address 739 CAMBERWELL DE	ig Address 739 CAMBERWELL DR					
		0 6 1 8 2 0 1 1					
	City	Transaction ID: INCA100953					
	EAGAN	State Zip Code MN 55123	Amount of Each Receipt this Period				
		10111 33123	Amount of Lach Necept this Fellod				
	FEC ID number of contributing	C	25.00				
	federal political committee.						
	Name of Employer	Occupation	-				
	Name of Employer MEDCO HEALTH SOLUTIONS	NATL ACCT EXEC					
	Receipt For:	Aggregate Year-to-Date V	-				
	Primary General	Aggregate rear-to-Date •					
	Other (specify)	325.00					
		0 0 0 0 0 0 0 0 0					
C.	Full Name (Last, First, Middle Initial) MR DAVID SCHLETT		Date of Receipt				
υ.			- '				
	Mailing Address 339 GRAMERCY PL		0 6 1 8 2 0 1 1				
	City	State Zip Code					
	GLEN ROCK		Transaction ID: INCA101129				
	GLENROCK	NJ 07452	Amount of Each Receipt this Period				
	FEC ID number of contributing	С	50.00				
	federal political committee.						
	Name of Employer	Occupation	-				
	Name of Employer MEDCO HEALTH SOLUTIONS	SVP FINANCIAL & ANALYTICAL SV					
			식				
		Aggregate Year-to-Date 🔻					
	Primary General	650.00					
	Other (specify)						
			100.00				
	SUBTOTAL of Receipts This Page (optional)	····· •	100.00				
	TOTAL This Period (last page this line number only)						

or for commercial purpose         NAME OF COMMITTE         MEDCO HEALTH S         Full Name (Last, First,         MR DENNIS SCHONBA         Mailing Address         Mailing Address         35 /         City         BRANCHBURG         FEC ID number of cont         federal political committ         Name of Employer         MEDCO HEALTH SOI         Receipt For:         Primary         Other (specify)         Full Name (Last, First,         ENC SCHUPP	es, other than using the name ar EE (In Full) SOLUTIONS INC. POLITIC Middle Initial) ACHLER ARAPAHO TRAIL Sta NJ ttributing ttee. DLUTIONS General	ad address of any political committee to s	13       14       15       16       17         n for the purpose of soliciting contributions solicit contributions from such committee.       18       18       19         Medco Health PAC)       Date of Receipt       18       2011       18       2011         Transaction ID: INCA101312       Amount of Each Receipt this Period       25.00       25.00	
MEDCO HEALTH S         Full Name (Last, First,         MR DENNIS SCHONBA         Mailing Address 35 /         City         BRANCHBURG         FEC ID number of contifederal political committing         Name of Employer         MEDCO HEALTH SOL         Receipt For:         Primary         Other (specify)         B.         Full Name (Last, First,         ERIC SCHUPP         Mailing Address 340         City         MEMPHIS         FEC ID number of contifederal political committing         Name of Employer         ACCREDO HEALTH CONTINUE         Receipt For:         Primary         Other (specify)         City         MEMPHIS         FEC ID number of contifederal political committing         Name of Employer         ACCREDO HEALTH CONTIFICATION         Receipt For:         Primary         Other (specify)         City         Mailing Address 911         City         SKOKIE         FEC ID number of contifederal political committing	SOLUTIONS INC. POLITIC Middle Initial) ACHLER ARAPAHO TRAIL Sta NJ tributing ttee. DLUTIONS General	te Zip Code 08876	Date of Receipt Date of Receipt 0 6 / 1 8 / 2 0 1 1 Transaction ID: INCA101312 Amount of Each Receipt this Period	
A. <u>MR DENNIS SCHONBA</u> Mailing Address 35 / City <u>BRANCHBURG</u> FEC ID number of cont federal political commit Name of Employer MEDCO HEALTH SOI Receipt For: Primary Other (specify) ▼ B. Full Name (Last, First, ERIC SCHUPP Mailing Address 340 City <u>MEMPHIS</u> FEC ID number of cont federal political commit Name of Employer ACCREDO HEALTH ( Receipt For: Primary Other (specify) ▼ C. Full Name (Last, First, MR ALLEN SCHWARTZ Mailing Address 911 City SKOKIE FEC ID number of cont federal political commit	ACHLER ARAPAHO TRAIL Sta NJ tributing ttee. C ULUTIONS General Aggr	08876	M M / D D / Y Y Y Y 0 6 18 2011 Transaction ID: INCA101312 Amount of Each Receipt this Period	
City <u>BRANCHBURG</u> FEC ID number of cont federal political commit Name of Employer MEDCO HEALTH SOU Receipt For: Primary Other (specify) ▼ B. Full Name (Last, First, ERIC SCHUPP Mailing Address 340 City <u>MEMPHIS</u> FEC ID number of cont federal political commit Name of Employer ACCREDO HEALTH O Receipt For: Primary Other (specify) ▼ C. Full Name (Last, First, MR ALLEN SCHWARTZ Mailing Address 911 City SKOKIE FEC ID number of cont federal political commit	sta NJ trributing ttee. DLUTIONS General	08876	0 6 1 8 2 0 1 1 Transaction ID: INCA101312 Amount of Each Receipt this Period	
BRANCHBURG         FEC ID number of cont         FEC ID number of cont         rederal political committ         Name of Employer         MEDCO HEALTH SOI         Receipt For:         Primary         Other (specify)         City         MEMPHIS         FEC ID number of cont         federal political committ         Name of Employer         ACCREDO HEALTH O         Receipt For:         Primary         Other (specify)         City         MEMPHIS         FEC ID number of cont         federal political committ         Name of Employer         ACCREDO HEALTH O         Receipt For:         Primary         Other (specify)         City         Mailing Address         911         City         SKOKIE         FEC ID number of comt         federal political committ	NJ ttributing ttee. DLUTIONS General	08876	Amount of Each Receipt this Period	
FEC ID number of contifederal political committed         Name of Employer         MEDCO HEALTH SOL         Receipt For:         Primary         Other (specify) ♥         Accredition         Receipt For:         Primary         Other (specify) ♥         Mailing Address         340         City         MEMPHIS         FEC ID number of contifederal political committed         Name of Employer         ACCREDO HEALTH Control         Receipt For:         Primary         Other (specify) ♥         City         Mailing Address         Primary         Other (specify) ♥         Full Name (Last, First, MR ALLEN SCHWARTZ Mailing Address         Mailing Address       911         City         SKOKIE         FEC ID number of contifederal political commit	ttributing ttee. C OCCU SR I General	Ipation		
Receipt For:       Primary         Other (specify)          Full Name (Last, First, ERIC SCHUPP          Mailing Address       340         City          MEMPHIS          FEC ID number of cont federal political commit         Name of Employer ACCREDO HEALTH O         Receipt For:         Primary         Other (specify)         Full Name (Last, First, MR ALLEN SCHWARTZ Mailing Address         Mailing Address       911         City         SKOKIE         FEC ID number of comifederal political commit	General Aggr		-	
Primary         Other (specify)         Full Name (Last, First, ERIC SCHUPP         Mailing Address       340         City       MEMPHIS         FEC ID number of contifederal political committed         Name of Employer ACCREDO HEALTH (CRECIPT For:         Primary       Other (specify)         City         Full Name (Last, First, MR ALLEN SCHWARTZ Mailing Address         Mailing Address       911         City         SKOKIE         FEC ID number of contifederal political committed	General			
3.       ERIC SCHUPP         Mailing Address       340         City       MEMPHIS         FEC ID number of cont       federal political commit         Name of Employer       ACCREDO HEALTH O         Receipt For:       Primary         Other (specify)       ▼         Full Name (Last, First,       MR ALLEN SCHWARTZ         Mailing Address       911         City       SKOKIE         FEC ID number of commit       FEC ID number of commit	<b>'</b>	regate Year-to-Date ▼ 325.00		
City <u>MEMPHIS</u> FEC ID number of cont federal political commit Name of Employer ACCREDO HEALTH O Receipt For: Primary Other (specify) Full Name (Last, First, MR ALLEN SCHWARTZ Mailing Address 911 City SKOKIE FEC ID number of cont federal political commit	Middle Initial)		Date of Receipt	
MEMPHIS FEC ID number of cont federal political commit Name of Employer ACCREDO HEALTH ( Receipt For: Primary Other (specify) Full Name (Last, First, MR ALLEN SCHWARTZ Mailing Address 911 City SKOKIE FEC ID number of cont federal political commit	) S. MAIN	M M / D D / Y Y Y Y 06 18 2011		
FEC ID number of cont federal political commit ACCREDO HEALTH ( Receipt For: Primary Other (specify) Full Name (Last, First, MR ALLEN SCHWARTZ Mailing Address 911 City SKOKIE FEC ID number of cont federal political commit	Sta	•	Transaction ID: INCA101326	
Receipt For: Primary Other (specify) Full Name (Last, First, MR ALLEN SCHWARTZ Mailing Address 911 City SKOKIE FEC ID number of cont federal political commit		38103	Amount of Each Receipt this Period	
Primary Other (specify) ♥ Full Name (Last, First, MR ALLEN SCHWARTZ Mailing Address 911 City SKOKIE FEC ID number of cont federal political commit	GROUP Occu DIR	pation PRODUCT LINE II	-	
C. MR ALLEN SCHWARTZ Mailing Address 911 City SKOKIE FEC ID number of cont federal political commit	General	egate Year-to-Date 325.00		
City <u>SKOKIE</u> FEC ID number of cont federal political commit			Date of Receipt	
SKOKIE FEC ID number of cont federal political commit	1 N KARLOV		M M / D D / Y Y Y Y 06 18 2011	
federal political commit	Sta	te Zip Code 60076	Transaction ID: INCA100859 Amount of Each Receipt this Period	
Name of Employer MEDCO HEALTH SOI			25.00	
	UUTIONS Occu	Ipation DIR CLINICAL PROD CONSULT	-	
Receipt For: Primary Other (specify)		regate Year-to-Date ▼ 350.00		
SUBTOTAL of Receipts	General		75.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 350 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
لا A.	Full Name (Last, First, Middle Initial) BRUCE SCOTT			Date of Receipt
	Mailing Address 18650 BEARPATH TR	AIL		06 18 Y Y Y Y 011 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City EDEN PRAIRIE	State MN	Zip Code	Transaction ID: INCA101340
	EDEN PRAIRIE FEC ID number of contributing federal political committee.	C	55347	Amount of Each Receipt this Period 192.31
	Name of Employer ACCREDO HEALTH GROUP	Occupation PRESID		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 2500.03	]
- B.	Full Name (Last, First, Middle Initial) MS CYNTHIA SCOTT Mailing Address 18650 BEARPATH TR	AIL		Date of Receipt
	City	State	Zip Code	0 6 1 8 2 0 1 1 Transaction ID: INCA100786
	EDEN PRAIRIE	MN	55437	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1 · · · · · · · · · · · · · · · · · · ·	IICAL PROG DEV	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date 650.00	]
- C.	Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT			Date of Receipt
	Mailing Address 7330 EVEREST LANE	- NORTH		0 6 / D D / Y Y Y Y 2 0 1 1
	City MAPLE GROVE	State MN	Zip Code 55311	Transaction ID: INCA101178 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			292.31
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 351 / 434 (check only one)
	ITEMIZED RECEIPTS		for each category of the	
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements ma	y not be sold or used by any persc dress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	. Medco Health PAC)		
<b>A</b> .	Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE	Date of Receipt		
	Mailing Address 3021 E MILLCREEK RC	DAD		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100777
	SALT LAKE CITY	UT	84109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		n IR CLINICAL SVCS	
	Receipt For:	-	e Year-to-Date V	-
	Primary General	Ayyreyau		1
	Other (specify)	0 0	650.00	
в.	Full Name (Last, First, Middle Initial) MR ROBERT SENDEWICZ			Date of Receipt
	Mailing Address 1220 CROSSING WAY	M = M         /         D = D         /         Y = Y = Y         Y           0 6         1 8         2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100821
	WAYNE	NJ	07470	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary   General     Other (specify)		325.00	]
С.	Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV			Date of Receipt
	Mailing Address 66 PROSPECT AVE			0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101205
	WESTWOOD	NJ	07675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUS	on INESS DEV	1
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	650.00	]
	SUBTOTAL of Receipts This Page (optional)			125.00
	SUBTUTAL OF RECEIPTS THIS Page (optional)		••••••	
	TOTAL This Period (last page this line number o	nly)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each o	rate schedule(s) category of the Summary Page	FOR LINE NUMBER:       PAGE 352 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold name and address of any	or used by any perso political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. F	OLITICAL ACTION CO	OMMITTEE (a.k.a	. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) MRS PATRICIA SGARELLA			Date of Receipt			
	Mailing Address 275 MAIN STREET			06 18 Y Y Y Y 06 18 2011			
	City	State Zip Cod	le	Transaction ID: INCA101212			
	GLEN ROCK	NJ 07452		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PRICING					
	Receipt For:	Aggregate Year-to-Date	₽ ▼				
	Primary     General       Other (specify) ▼		325.00				
в.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III			Date of Receipt			
	Mailing Address 1767 FAIRMOUNT ST	REET		M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         1 8         2 0 1 1			
	City	State Zip Cod	le	Transaction ID: INCA101053			
	CARMEL	IN 46032		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ONCOLOGY TF	RC OPS				
	Receipt For: Primary General	Aggregate Year-to-Date	e ▼				
	Other (specify) ▼		780.00				
с.	Full Name (Last, First, Middle Initial) MR ROBERT SHANNON			Date of Receipt			
	Mailing Address 59 DANNER AVE			06 / D D / Y Y Y Y 06 18 2011			
	City	State Zip Cod	le	Transaction ID: INCA101134			
	HARRISON	NY 10528		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE					
	Receipt For: Primary General	Aggregate Year-to-Date	e ▼				
	Other (specify) ▼		325.00				
	SUBTOTAL of Receipts This Page (optional)		<b>•</b>	80.00			
	TOTAL This Period (last page this line number						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 353 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions
		POLITICAL ACTION COMMITTEE (a.k.a.	
لا A.	Full Name (Last, First, Middle Initial) WILLIAM SHANNON	Date of Receipt	
	Mailing Address 711 BIRCHWOOD DR	M M / D D / Y Y Y Y 06 / 18 / 2011	
	City	State Zip Code	Transaction ID: INCA101361
	WESTBURY	NY 11590	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & CHIEF PROCURE OFFICER	
	Receipt For:	Aggregate Year-to-Date ▼	
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	1728.00	
- В.	Full Name (Last, First, Middle Initial) MR VALEY SHARGORODSKY		Date of Receipt
	Mailing Address 447 OGDEN AVE		0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100802
	TEANECK	NJ 07666	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	325.00	
- C.	Full Name (Last, First, Middle Initial) MR JOHN SHEA	I	Date of Receipt
	Mailing Address 62 FRANKLIN TURNP	IKE	0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100796
	ALLENDALE	NJ 07401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	520.00	
ſ	SUBTOTAL of Receipts This Page (optional)	······	257.00
F	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 354 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR FRANK SHEEHY			Date of Receipt
	Mailing Address 550 KNOLLWOOD RC	DAD		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100878
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio GROUP	<sup>n</sup> PRES SPEC PHARM SEGN	/ENT
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	2496.00	]
B.	Full Name (Last, First, Middle Initial) DAWN SHERMAN			Date of Receipt
	Mailing Address 63 BRAMSHILL DRIV	M M / D D / Y Y Y Y 06 18 2011		
	City	State	Zip Code	Transaction ID: INCA101308
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP INT	n L/COO JV	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		650.00	
С.	Full Name (Last, First, Middle Initial) MR PETER SHERMAN			Date of Receipt
	Mailing Address 139 GATES AVENUE			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100770
	MONTCLAIR FEC ID number of contributing	NJ	07042	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST G	n ENERAL COUNSEL	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	650.00	
	SUBTOTAL of Receipts This Page (optional)			292.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 355 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) WENDELL SHERRELL Mailing Address PO BOX 748			Date of Receipt
				06 18 2011
	City	State	Zip Code	Transaction ID: INCA101336
	COLLIERVILLE	TN	38027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR ACC	on CDO CORP HR & TALENT M	идт
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 390.00	]
в.	Full Name (Last, First, Middle Initial) MR MARK SHINKLE			Date of Receipt
	Mailing Address 4464 REPASS DRIVE			0 6 / D D / Y Y Y Y 2 0 1 1
		State IN	Zip Code	Transaction ID: INCA100891
	WESTFIELD FEC ID number of contributing federal political committee.	C	46074	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on SINESS PLANNING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
С.	Full Name (Last, First, Middle Initial) MR JAMES SHIVAS			Date of Receipt
	Mailing Address 18 PROSPECT AVE			M         M         /         D         D         Y
		State	Zip Code	Transaction ID: INCA100984
	NORTH ARLINGTON	NJ	07031	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRI	CING	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)			67.50
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 356 / 434           (check only one)         11c         12           X         11a         11b         11c         12
[	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to s	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.
		POLITICAL ACTION COMMITTEE (a.k.a.	
A.	Full Name (Last, First, Middle Initial) MR ELWOOD SIDES III	Date of Receipt	
	Mailing Address 150 CLAREMONT AVE	M M / D D / Y Y Y Y 06 18 2011	
	City	State Zip Code	Transaction ID: INCA100893
		CA 90803	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES	-
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	325.00	
- В.	Full Name (Last, First, Middle Initial) MS JODI SILBERMANN		Date of Receipt
	Mailing Address 16 TULIP LANE	M M / D D / Y Y Y Y 06 18 2011	
	City	State Zip Code	Transaction ID: INCA101145
	RANDOLPH	NJ 07869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	-
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary     General       Other (specify) ▼	325.00	
- C.	Full Name (Last, First, Middle Initial) JEFFREY SIMEK	1	Date of Receipt
	Mailing Address 3555 GRANDE TUSCA	ANY WAY	M M / D D / Y Y Y Y 06 18 2011
		State Zip Code	Transaction ID: INCA101015
	NEW SMYRNA BEACH FEC ID number of contributing	FL 32168	Amount of Each Receipt this Period
	federal political committee.	Occupation	
	Name of Employer MEDCO HEALTH SOLUTIONS	VP CORP COMMUNICATIONS	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)	······	100.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 357 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
	angle MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
A. 2	Full Name (Last, First, Middle Initial) MR LEE SIMON			Date of Receipt			
	Mailing Address 2390 GREENVIEW RC	DAD		06 18 Y Y Y Y 011 0 0 1 1			
	City	State	Zip Code	Transaction ID: INCA101188			
	NORTHBROOK	IL	60062	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	-			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify)     ▼	0 0	650.00	]			
- B.	Full Name (Last, First, Middle Initial) MR JEFFREY SINKO			Date of Receipt			
	Mailing Address 10 CHERRY TREE LA	NE		06 18 Y Y Y Y 2011			
	City	State	Zip Code	Transaction ID: INCA101063			
	KINNELON	NJ	07405	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST G	n ENERAL COUNSEL				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify)     ▼	0 0	650.00	]			
- C.	Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO	I		Date of Receipt			
	Mailing Address 564 DALE COURT EA	ST		M M / D D / Y Y Y Y 06 18 2011			
	City	State	Zip Code	Transaction ID: INCA100820			
	RIVER VALE	NJ	07675	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		30.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC D	n IR TECHNOLOGY				
	Receipt For:	Aggregate	e Year-to-Date 🔻	_			
	Primary     General       Other (specify) ▼	0 0	390.00				
ſ	SUBTOTAL of Receipts This Page (optional)			130.00			
ľ	TOTAL This Period (last page this line number	only)	······				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 358 / 434           (check only one)
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	A MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JOHN SISTO			Date of Receipt
	Mailing Address 24 MAYBERRY LANE			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101117
	MECHANICSBURG	PA	17050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n PHARMACY REGULATORY	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
В.	Full Name (Last, First, Middle Initial) MR DAVID SITVER			Date of Receipt
	Mailing Address 24 YORKSHIRE AVE			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: INCA100983
	SUFFERN	NY	10901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC D	n IR TECHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date	
	Other (specify) ▼	0 0	475.00	
с.	Full Name (Last, First, Middle Initial) ARUNBABU SIVAGAMINATHAN			Date of Receipt
	Mailing Address 11 LINDA CT			0 6 / D D / Y Y Y Y 0 6 18 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101286
	LINCOLN PARK	NJ	07035	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNI	n CAL SPECIALIST	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	325.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number of			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 359 / 434           (check only one)         X           X         11a           13         14           15         16
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
×.	Full Name (Last, First, Middle Initial) MR BRADLEY SKATTER	Date of Receipt		
	Mailing Address 6433 FRANKLIN HILL	0 6 1 8 Y Y Y Y 0 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100801
	INDEPENDENCE	MN	55359	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC D	n R CLINICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0.0	650.00	
_	Full Name (Last, First, Middle Initial) MR EDWARD SKRIPATA	<b>I</b>		Date of Receipt
	Mailing Address 70 RIVER ROAD UNIT D9			M         M         /         D         D         /         Y
	City CLIFTON	State NJ	Zip Code 07014	Transaction ID: INCA101097 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNI	n CAL SPECIALIST	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	9 Year-to-Date ▼ 325.00	]
-	Full Name (Last, First, Middle Initial) ANN SMITH			Date of Receipt
	Mailing Address 437 GLENDALE RD			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100991
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n PUBLIC AFFAIRS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 650.00	]
	SUBTOTAL of Receipts This Page (optional)	•		125.00

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 360 / 434
	· · · ·	· · ·		(check only one)
	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Г				13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	ay not be sold or used by any p Idress of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a	.k.a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ROBERT SMITH	Date of Receipt		
	Mailing Address 40 JOSHUA DR T			0 6 / D D / Y Y Y Y 0 1 8 / 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101153
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		650.00	
-	Other (specify) ▼	0 0		
в.	Full Name (Last, First, Middle Initial) MR ERIC SMITHER			Date of Receipt
	Mailing Address 1132 NORTH ST RT 12	M         M         /         D         D         Y		
	City	State	Zip Code	Transaction ID: INCA100910
	LEBANON	OH	45036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		325.00	
-	Full Name (Last, First, Middle Initial)			
C.	MR DAVID SNOW, JR			Date of Receipt
	Mailing Address 23 CEDAR GATE ROA	U		06 18 YYYY 01 18 2011
	City	State	Zip Code	Transaction ID: INCA101225
	DARIEN	СТ	06820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio CHAIRM	on IAN & CEO	
	Receipt For:	-!	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		2500.03	
Г				
	SUBTOTAL of Receipts This Page (optional)			▶ 254.81
	TOTAL This Period (last page this line number of	only)		•
	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 361 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
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	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO			
۷ A.	Full Name (Last, First, Middle Initial) MR ALAN SOKALER			Date of Receipt
	Mailing Address 30 MICHELLE WAY	0 6 / D D / Y Y Y Y 0 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101258
	PINE BROOK	NJ	07058	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-
	Other (specify)	0 0	650.00	
в.	Full Name (Last, First, Middle Initial) MS MICHELE ST CLAIR			Date of Receipt
	Mailing Address 7 EVERGREEN DRIVE UNIT 47			M M         /         D D         /         Y
	City CLIFTON	State NJ	Zip Code	Transaction ID: INCA101196
	FEC ID number of contributing		07014	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FOR	n RMULARY & COVERAGE M	GMT
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)		325.00	
– C.	Full Name (Last, First, Middle Initial) BRENDA STAFFORD			Date of Receipt
	Mailing Address 647 BERKELEY AVENU	JE		M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101342
	ORANGE FEC ID number of contributing	NJ	07050	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CO	n OUNSEL	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-
	Other (specify)	0 0	325.00	
Γ	SUBTOTAL of Receipts This Page (optional)			100.00
F	TOTAL This Period (last page this line number o	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 362 / 434         (check only one)       X         X       11a       11b       11c       12         I3       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR RALPH STAIANO		Date of Receipt
	Mailing Address 1 LAMBROS DRIVE		0 6 / <sup>D</sup> D / <sup>Y</sup> Y Y Y 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100787
	MONROE	NY 10950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	325.00	
- В.	Full Name (Last, First, Middle Initial) PETER STARK		Date of Receipt
	Mailing Address 4840 COLE ROAD		M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA101397
	MEMPHIS	TN 38117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation CHIEF FINANCIAL OFFICER	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	650.00	
- C.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN		Date of Receipt
	Mailing Address 7 FOREST LAKE DR		M M / D D / Y Y Y Y 06 18 2011
	City WEST HARRISON	State Zip Code NY 10604	Transaction ID: INCA101131 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCIAL & ANALYTICAL SVC	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.03	
	SUBTOTAL of Receipts This Page (optional)	······	267.31
ŀ	TOTAL This Period (last page this line number	only)	

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	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 363 / 434			
	• • •		Use separate schedule(s) for each category of the	(check only one)			
	TEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
		13 14 15 16 17					
	Any information copied from such Reports and Si or for commercial purposes, other than using the	on for the purpose of soliciting contributions oslicit contributions from such committee.					
1	NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. P	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
A.	Full Name (Last, First, Middle Initial) CHANNING STAVE	Date of Receipt					
	Mailing Address 77 HIGHVIEW AVE	M         M         /         D         D         Y					
	City	State	Zip Code	Transaction ID: INCA101313			
	TUCKAHOE	NY	10707	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	m MARKETING					
	Receipt For:		e Year-to-Date 🔻				
	Primary General			1			
	Other (specify)	0 0	325.00				
в.	Full Name (Last, First, Middle Initial) MS JILL STEARNS			Date of Receipt			
	Mailing Address 13130 HALSELL DR			M         M         /         D         D         Y			
	City	State	Zip Code	Transaction ID: INCA101191			
	AUSTIN	TX	78732	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	n L ACCT EXEC				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General		650.00				
	Other (specify) 🔻	0 0	650.00				
с.	Full Name (Last, First, Middle Initial) MR CRAIG STEEL			Date of Receipt			
	Mailing Address 122 DEMAREST AVEN	NUE		M         M         /         D         D         Y			
	City	State	Zip Code	Transaction ID: INCA100920			
	EMERSON	NJ	07630	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n L ACCT EXEC				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General		650.00				
	Other (specify)						
	SUBTOTAL of Receipts This Page (optional)			125.00			
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	TOTAL This Period (last page this line number of	only)	I				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 364 / 434           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
<b>A</b> .	Full Name (Last, First, Middle Initial) MR JOHN STEIBLE	Date of Receipt		
	Mailing Address 44 BIRCHWOOD LANE	0 6 / D D / Y Y Y Y 2 0 1 1		
	City State		Zip Code	Transaction ID: INCA101275
	BOONTON TOWNSHIP	NJ	07005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CT EXEC	
	Receipt For:		Year-to-Date V	
	Other (specify) ▼	0 0	325.00	]
в.	Full Name (Last, First, Middle Initial) MS AMY STEINKELLNER			Date of Receipt
	Mailing Address 728 GULF BOULEVAR C/O PO BOX 834	06 / 18 / Y Y Y Y 011 1		
	City State		Zip Code	Transaction ID: INCA100973
	INDIAN ROCKS BEACH FEC ID number of contributing federal political committee.	FL C	33785	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ONAL PRACTICE LEADER	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify) ▼	0 0	650.00	]
с.	Full Name (Last, First, Middle Initial) MS LEAH STERMAN-KABRT			Date of Receipt
0.	Mailing Address 24 OAK PL			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100988
	NORTH CALDWELL	NJ	07006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	DAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	foi De	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER:         PAGE 365 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not t name and address	be sold or used by any perso of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION	ON COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) DR GLEN STETTIN			Date of Receipt
	Mailing Address 8 MILL GLEN CT			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State 2	Zip Code	Transaction ID: INCA101209
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF MEDIC	CAL OFFICER	
	Receipt For:	Aggregate Year	-to-Date 🔻	
	Primary     General       Other (specify) ▼		2500.03	]
В.	Full Name (Last, First, Middle Initial) MR GERARD STOCKER, JR			Date of Receipt
	Mailing Address 80 ALGONQUIN TRL			M · M         /         D · D         Y         Y · Y · Y         Y
	City		Zip Code	Transaction ID: INCA100921
	OAKLAND	NJ	07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACC		_
	Receipt For: Primary General	Aggregate Year	-to-Date 🔻	
	Other (specify) ▼		650.00	
с.	Full Name (Last, First, Middle Initial) MS JANNA STOUL			Date of Receipt
	Mailing Address 4 APACHE WAY			0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City		Zip Code	Transaction ID: INCA100806
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR TE		
	Receipt For: Primary General	Aggregate Year	-to-Date 🔻	
	Other (specify) ▼		325.00	
	SUBTOTAL of Receipts This Page (optional)	•	·····	267.31
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 366 / 434           (check only one)
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	on for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	OLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS SUZANNE STREDNAK Mailing Address 157 WATCHUNG DR		Date of Receipt
			06 18 2011
	City	State Zip Code	Transaction ID: INCA100864
	HAWTHORNE FEC ID number of contributing federal political committee.	NJ 07506	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	7
 3.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address 7925 HICKORY AVE		0 6 / 1 8 / Y Y Y Y 0 1 1 8
	City	State Zip Code	Transaction ID: INCA100853
	RUSSELLS POINT FEC ID number of contributing federal political committee.	OH 43348	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL THERAPEUTICS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
 ).	Full Name (Last, First, Middle Initial) MILAYNA SUBAR, MD		Date of Receipt
	Mailing Address 11 RIVERSIDE DRIVE #8CE		M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         1 8         2 0 1 1
	City NEW YORK	State Zip Code NY 10023	Transaction ID: INCA101339 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATIONAL PRACTICE LEADER	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
s	UBTOTAL of Receipts This Page (optional)		125.00
Т	OTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $367 / 434$ (check only one)(check only one)X11a11b1314151617
	NAME OF COMMITTEE (In Full)           MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) MRS WILARENE SUGGS Mailing Address 5111 FLUSS CV N			Date of Receipt
				06 18 2011
	City BARTLETT	State TN	Zip Code	Transaction ID: INCA101077
	FEC ID number of contributing federal political committee.	C	38135	Amount of Each Receipt this Period
	Name of Employer ACCREDO HEALTH GROUP	Occupatio SR MGF	n { CUST SVC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
в.	Full Name (Last, First, Middle Initial) MS COLEEN SULLIVAN Mailing Address 38 BARKMILL TERRAC	CE		Date of Receipt
		06 18 2011		
	City MONTVILLE	State NJ	Zip Code 07045	Transaction ID: INCA101189
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		TECHNOLOGY	
	Primary General Other (specify) $rac{1}{2}$	Aggregate	e Year-to-Date 325.00	]
C.	Full Name (Last, First, Middle Initial) MR MARK SULLIVAN			Date of Receipt
	Mailing Address 16025 PINE VALE PL.			0 6 / D D / Y Y Y Y 0 6 1 8 2011
	City	State	Zip Code	Transaction ID: INCA100794
	MIDLOTHIAN	VA	23113	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	-1	SS PROCESS SPECIALIST	_
	Primary General Other (specify) ▼		e Year-to-Date 650.00	]
	SUBTOTAL of Receipts This Page (optional)		······	100.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 368 / 434           (check only one)         X           X         11a         11b         11c         12
ſ	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	n for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO			
A.	Full Name (Last, First, Middle Initial) MR FREDERICK SUMNER Mailing Address 808 HOLLYWOOD AVE			Date of Receipt
				06 18 2011
	City HO-HO-KUS	State NJ	Zip Code	Transaction ID: INCA100872
	HO-HO-KUS FEC ID number of contributing federal political committee.	C	07423	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	m MARKET STRATEGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
- В.	Full Name (Last, First, Middle Initial) MS IRENE SUTTON			Date of Receipt
	Mailing Address 20 AVENUE @ PORT I APT 209	M         M         /         D         D         /         Y		
		State	Zip Code	Transaction ID: INCA100882
	WEST NEW YORK FEC ID number of contributing federal political committee.	C	07093	Amount of Each Receipt this Period 40.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General		on TECHNOLOGY e Year-to-Date ▼ 520.00	1
_	Other (specify) 🔻	0 0		]
C.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT Mailing Address 8362 GOLDEN PRAIRI	E DRIVE		Date of Receipt
	City	State	Zip Code	Transaction ID: INCA100931
	TAMPA FEC ID number of contributing federal political committee.	FL C	33647	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	-!	e Year-to-Date 650.00	]
ſ	SUBTOTAL of Receipts This Page (optional)		<b>_</b>	90.00
ŀ	TOTAL This Period (last page this line number of		•	

l	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Statements may	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any persi	FOR LINE NUMBER:         PAGE 369 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17           on for the purpose of soliciting contributions         10         11         10		
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	r for commercial purposes, other than using the name and address of any political committee to so				
A.	Full Name (Last, First, Middle Initial) MARK TANKERSLEY Mailing Address 1374 SAWMILL CREE	Date of Receipt				
			Zip Code	06 18 2011		
	City CORDOVA			Transaction ID: INCA101394		
	FEC ID number of contributing federal political committee.	C	38018	Amount of Each Receipt this Period 30.00		
			n DICAL INFORMATICS Year-to-Date ▼	_		
	Primary General Other (specify) ▼		390.00	]		
в.	Full Name (Last, First, Middle Initial) MR NICHOLAS TAYLOR Mailing Address 2847 NORTHWEST B	BLVD		Date of Receipt		
	City	State	Zip Code	0 6 1 8 2 0 1 1 Transaction ID: INCA101217		
	UPPER ARLINGTON	OH	43221	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL SVCS			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 325.00	]		
– C.	Full Name (Last, First, Middle Initial) AMI THAKKAR			Date of Receipt		
	Mailing Address 1040 W ADAMS STRI UNIT 248	EET		M M / D D / Y Y Y Y 06 18 2011		
	City	State	Zip Code	Transaction ID: INCA101234		
	CHICAGO	IL	60607	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CLINICAL SVCS			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]		
	SUBTOTAL of Receipts This Page (optional)	•		80.00		
F	TOTAL This Period (last page this line number	only)				

				· · · · · · · · · · · · · · · · · · ·
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 370 / 434
	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)		2.000 or any pointour committee to	
			ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR BOOBALAN THANGAVELU	Date of Receipt		
	Mailing Address 13 BIRCH TERRACE			0 6 / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101244
	MT ARLINGTON	NJ	07856	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General		325.00	1
_	Other (specify)	0 0	323.00	
в.	Full Name (Last, First, Middle Initial) MS MELINDA THIEL			Date of Receipt
	Mailing Address 27 GARVEY ROAD			M · M         /         D · D         Y         Y · Y · Y         Y
	City State		Zip Code	Transaction ID: INCA100892
	WAYNE	NJ	07470	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROI	n DUCT DEVELOPMENT	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify)	0 0	325.00	]
C.	Full Name (Last, First, Middle Initial) MS MELISSA THOMET			Date of Receipt
	Mailing Address 721 HINMAN AVE #1E			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA100800
	EVANSTON	IL	60202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ACCT MGMT OPS	
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify) ▼		325.00	]
[	SUBTOTAL of Receipts This Page (optional)			75.00
	SUBTUTAL OF RECEIPTS THIS Page (optional)		••••••	
	TOTAL This Period (last page this line number or	nly)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 371 / 434 (check only one) X 11a 11b 11c 12
_		13     14     15     16     17	
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)		
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS MARY THORSBY		Date of Receipt
	Mailing Address 17326 ELLEN DR	06 / D / Y Y Y Y 06 18 2011	
	City	State Zip Code	Transaction ID: INCA100951
	LIVONIA	MI 48152	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	1075.00	
- В.	Full Name (Last, First, Middle Initial) DREW THRAEN		Date of Receipt
	Mailing Address 63 STILES AVE		06 / D D / Y Y Y Y 018 2011
	City	State Zip Code	Transaction ID: INCA101305
	MORRIS PLAINS	NJ 07950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	325.00	
– C.	Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN		Date of Receipt
	Mailing Address 838 COLONIAL RD		M M / D D / Y Y Y Y 06 18 2011
	City	State Zip Code	Transaction ID: INCA100808
	FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENEFIT SYSTEMS SUPPORT	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify)	650.00	
	SUBTOTAL of Receipts This Page (optional)	•	175.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 372 / 434           (check only one)			
	Any information copied from such Reports and St or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any persor or for commercial purposes, other than using the name and address of any political committee to s				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N				
Α.	Full Name (Last, First, Middle Initial) MRS CHINNERETH TORRACA	MRS CHINNERETH TORRACA				
	Mailing Address 95 ERNST AVENUE					
	City BLOOMFIELD	State Zip Code	Transaction ID: INCA100826			
	FEC ID number of contributing federal political committee.	NJ 07003	Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIENT REQUIREMENTS				
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 325.00				
В.	Full Name (Last, First, Middle Initial) SHERRY TOWNSEND		Date of Receipt			
	Mailing Address 1327 FAIRWAY FORE	ST DRIVE EAST	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1			
	City	State Zip Code	Transaction ID: INCA101380			
	CORDOVA FEC ID number of contributing federal political committee.	TN 38016	Amount of Each Receipt this Period			
	Name of Employer ACCREDO HEALTH GROUP	Occupation LD PHARMACIST				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00				
C.	Full Name (Last, First, Middle Initial) MR DAVID TRICE Mailing Address 150 BRADFORD DR.		Date of Receipt			
	City	State Zip Code	0 6 1 8 2 0 1 1 Transaction ID: INCA100764			
	SCHWENKSVILLE	PA 19473	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00				
	SUBTOTAL of Receipts This Page (optional)		▶ 75.00			
	TOTAL This Period (last page this line number of	nly)	•			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 373 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER	Date of Receipt		
	Mailing Address 713 INDIAN CREEK R	2		0 6 / D D / Y Y Y Y 2 0 1 1
	City AMHERST	State VA	Zip Code 24521	Transaction ID: INCA101058
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n GOVERNMENT AFFAIRS	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1560.00	]
в.	Full Name (Last, First, Middle Initial) MS DENISE TULP			Date of Receipt
	Mailing Address 685 SHAWNEE DRIVE	06 / D D / Y Y Y Y 08 / 18 / 2011		
		State NJ	Zip Code	Transaction ID: INCA101006
	FRANKLIN LAKES FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SAFE		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
C.	Full Name (Last, First, Middle Initial) ANN TURI			Date of Receipt
	Mailing Address 764 COMANCHE LANE	Ē		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101353
	FRANKLIN LAKES FEC ID number of contributing federal political committee.	NJ C	07417	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
	SUBTOTAL of Receipts This Page (optional)			195.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 374 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to s					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
A.	Full Name (Last, First, Middle Initial) MR JEFFREY TYLER	Date of Receipt					
	Mailing Address 37 KNOLL TERRACE			M         M         /         D         D         /         Y			
	City HAZLET	State NJ	Zip Code	Transaction ID: INCA101009			
	FEC ID number of contributing federal political committee.	C	07730	Amount of Each Receipt this Period 30.77			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	_			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 400.01	]			
в.	Full Name (Last, First, Middle Initial) JEFF ULANET Mailing Address 8803 BELMART RD	I		Date of Receipt			
	City	State	Zip Code	0 6 1 8 2 0 1 1 Transaction ID: INCA101347			
	POTOMAC MD		20854	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer ACCREDO HEALTH GROUP		DEV - ONCOLOGY				
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date 650.00	]			
С.	Full Name (Last, First, Middle Initial) MR THOMAS UNDERKOFFLER			Date of Receipt			
	Mailing Address 6 LAURA LANE			M M / D D / Y Y Y Y 06 18 2011			
	City KATONAH	State NY	Zip Code	Transaction ID: INCA101037			
	FEC ID number of contributing federal political committee.	C	10536	Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR LOG					
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 325.00	]			
	SUBTOTAL of Receipts This Page (optional)			105.77			
	TOTAL This Period (last page this line number	only)	I				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 375 / 434           (check only one)         11c         12           X         11a         11b         11c         12           13         14         15         16         17				
	Any information copied from such Reports and Si or for commercial purposes, other than using the	for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
⊻ A.	Full Name (Last, First, Middle Initial) MR KEITH URICH	Date of Receipt					
	Mailing Address 12495 SOUTH 1745 E	M         M         /         D         D         Y					
	City	State Zip Code	Transaction ID: INCA100977				
	DRAPER	UT 84020	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM ACCOUNT SERVICES	]				
	Receipt For:	Aggregate Year-to-Date 🔻					
	Primary     General       Other (specify) ▼	325.00					
- В.	Full Name (Last, First, Middle Initial) MRS JENNIFER UTTERDYKE		Date of Receipt				
	Mailing Address 1881 GREENTREE RC	0 6 1 8 Y Y Y Y 0 6 1 8 2 0 1 1					
	City	State Zip Code	Transaction ID: INCA100897				
	LEBANON	OH 45036	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MEDICATION SAFETY/QUALITY					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 650.00					
– C.	Full Name (Last, First, Middle Initial) MS CARA VAN ZILE		Date of Receipt				
	Mailing Address 31 LINCOLN RD		M M / D D / Y Y Y Y 06 18 2011				
	City	State Zip Code	Transaction ID: INCA100945				
	KINNELON	NJ 07405	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR ANALYTICAL SVCS					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 650.00					
ſ	SUBTOTAL of Receipts This Page (optional)	······	125.00				
ľ	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 376 / 434 (check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
А.	Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA			Date of Receipt
	Mailing Address 35507 N VIA TRAMON	NTO		M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101370
	PHOENIX	AZ	85086	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on GENERAL MGR	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	2496.00	]
В.	Full Name (Last, First, Middle Initial) MRS JEANNINE VANKLEECK	1		Date of Receipt
	Mailing Address 56 ZIMMER AVENUE	M M / D D / Y Y Y Y 06 18 2011		
	City	State	Zip Code	Transaction ID: INCA100831
	MIDLAND PARK	NJ	07432	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	, I	ANCIAL APPLICATIONS	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	
C.	Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS	I		Date of Receipt
	Mailing Address 105 ARRANDALE RD			M M / D D / Y Y Y Y 06 18 2011
	City	State	Zip Code	Transaction ID: INCA101051
	ROCKVILLE CENTRE	NY	11570	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MKT	ING	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0.0	650.00	]
	SUBTOTAL of Receipts This Page (optional)	•	••••••	267.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 377 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17		
	Any information copied from such Reports and Si or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N				
Α.	Full Name (Last, First, Middle Initial) MR WIL VELARDE	Date of Receipt				
	Mailing Address 443 WEST SADDLE R	IVER RD		0 6 1 8 Y Y Y Y Y 0 1 1 8 2 0 1 1		
		State	Zip Code	Transaction ID: INCA100880		
	UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	NJ C	07458	Amount of Each Receipt this Period 30.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n PRODUCT			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 390.00	]		
в.	Full Name (Last, First, Middle Initial) MR JEFFREY VERNICE			Date of Receipt		
	Mailing Address 201 WATCHUNG AVE UNIT #17	0 6 1 8 Y Y Y Y Y 0 1 1 8 2 0 1 1				
	City State		Zip Code	Transaction ID: INCA100875		
	BLOOMFIELD FEC ID number of contributing federal political committee.	NJ C	07003	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n COMPLIANCE			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 325.00	]		
С.	Full Name (Last, First, Middle Initial) MR GORDON VICKERS			Date of Receipt		
	Mailing Address 436 MOUNTAIN AVEN	IUE		M M / D D / Y Y Y Y 06 18 2011		
	City	State	Zip Code	Transaction ID: INCA100767		
	WESTFIELD FEC ID number of contributing federal political committee.	NJ C	07090	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CCT EXEC			
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date V 325.00	]		
	SUBTOTAL of Receipts This Page (optional)		······ <b>)</b>	80.00		
	TOTAL This Period (last page this line number	only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 378 / 434           (check only one)
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) MR MUNISH VU Mailing Address 11 BOULDER TRAIL City MAHWAH FEC ID number of contributing foderal political a constribution	State NJ	Zip Code 07430	Date of Receipt Date of Receipt 0 6 / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1 Transaction ID: INCA101246 Amount of Each Receipt this Period 25.00
	federal political committee.          Name of Employer         MEDCO HEALTH SOLUTIONS         Receipt For:         Primary       General         Other (specify) ▼	Occupatio DIR TEC	n CHNOLOGY e Year-to-Date 325.00	
в.	Full Name (Last, First, Middle Initial) MR STEVEN VREELAND Mailing Address 19 ANNA STREET City DENVILLE	State NJ	Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupatio DIR TEC	07834 m CHNOLOGY e Year-to-Date ▼ 325.00	Amount of Each Receipt this Period
С.	Full Name (Last, First, Middle Initial) MR DANIEL WALDEN Mailing Address 450 BEECHMONT DR			Date of Receipt
	City <u>NEW ROCHELLE</u> FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	_ · ·	Zip Code 10804 n GULATORY & MC PROGRA e Year-to-Date 2500.03	Transaction ID: INCA101108 Amount of Each Receipt this Period 192.31
	SUBTOTAL of Receipts This Page (optional)			242.31
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 379 / 434         (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	a. Medco Health PAC)		
∠ A.	Full Name (Last, First, Middle Initial) MS THERESE WALKER	Date of Receipt		
	Mailing Address 363 MULBERRY CT			0 6 / D D / Y Y Y Y 0 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100784
	WYCKOFF FEC ID number of contributing federal political committee.	NJ C	07481	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n PRODUCT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
— В.	Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE Mailing Address 5445 GOODWIN AVE			Date of Receipt
		06 18 2011		
	City State DALLAS TX		Zip Code 75206	Transaction ID: INCA101248
	DALLAS FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE	n ES SEGMENT LEADER	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date 2500.03	]
 C.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Date of Receipt
	Mailing Address 5 APPLE ORCHARD F	RD		0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101065
	MOORESTOWN FEC ID number of contributing federal political committee.	NJ	08057	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 1300.00	]
	SUBTOTAL of Receipts This Page (optional)			267.31
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 380 / 434 (check only one)
	ITEMIZED RECEIPTS		for each category of the	$\overline{X}$ 11a 11b 11c 12
			Detailed Summary Page	
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	> MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) LYNETTE WASHINGTON	Date of Receipt		
	Mailing Address 4272 MELWOOD OAK	DR		06 / D D / Y Y Y Y 026 / 18 / 2011
	City	State	Zip Code	Transaction ID: INCA101381
	LAKELAND	TN	38002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio		
	Receipt For:	Aggregate	e Year-to-Date 🔻	1
	Primary General		325.00	1
-	Other (specify) <b>v</b>	1		
В.	Full Name (Last, First, Middle Initial) MS CATHERINE WASSON	Date of Receipt		
	Mailing Address 3912 CALLE ANDALU	0 6 1 8 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA100812
	SAN CLEMENTE	CA	92673	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on L ACCTS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		650.00	]
C.	Full Name (Last, First, Middle Initial) MS BEVERLY WATSON			Date of Receipt
	Mailing Address 2 MICHELANGELO CO	DURT		0 6 1 8 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101101
	SOMERSET	NJ	08873	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BEN	on NEFIT DELIVERY SYSTEMS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	325.00	]
[	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 381 / 434         (check only one)		
	Any information copied from such Reports and St or for commercial purposes, other than using the	n for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	Medco Health PAC)			
∠ A.	Full Name (Last, First, Middle Initial) MR SHERMAN WEAVER	Date of Receipt			
	Mailing Address 4850 MCCOY CIRCLE		M         M         /         D         D         /         Y		
	City	State Zip Code	Transaction ID: INCA101294		
	CUMMING	GA 30040	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	26.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR DUR			
	Receipt For:	Aggregate Year-to-Date 🔻			
	Other (specify) ▼				
– В.	Full Name (Last, First, Middle Initial) MRS KELLY WEBBER		Date of Receipt		
	Mailing Address 107 UPPER SADDLE F	M M / D D / Y Y Y Y 06 18 2011			
	City	State Zip Code	Transaction ID: INCA101036		
	MONTVALE	NJ 07645	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	100.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP HR			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00			
– C.	Full Name (Last, First, Middle Initial) MARK WEGRYN		Date of Receipt		
	Mailing Address 13709 SMOKEY RIDG				
	City	State Zip Code	Transaction ID: INCA100989		
	CARMEL	IN 46033	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	25.00		
	Name of Employer ACCREDO HEALTH GROUP	Occupation AVP QA AND PRODUCT INTEGRAT	ION		
	Receipt For: Primary General Other (specify) <b>v</b>	Aggregate Year-to-Date 325.00			
	SUBTOTAL of Receipts This Page (optional)		151.00		
	TOTAL This Period (last page this line number of	>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for e	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER:       PAGE 382 / 434         (check only one)
	Any information copied from such Reports and Stat or for commercial purposes, other than using the na	n for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL ACTIO	N COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)	Date of Receipt		
	Mailing Address 1 BURGESS COURT			0 6 / D D / Y Y Y Y 0 6 / 1 8 / 2 0 1 1
	City WESTFIELD		p Code 7090	Transaction ID: INCA101311
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORP COM	MUNICATIONS	-
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate Year-te	o-Date ▼ 650.00	
в.	Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH Mailing Address 309 WATERVIEW DR			Date of Receipt
				06 18 2011
	City FRANKLIN LAKES		p Code 7417	Transaction ID: INCA100906 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS		EMPLOYER GROUP	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-te	2500.03	
C.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 26037 N WRANGLER R	D		M M / D D / Y Y Y Y 06 18 2011
			p Code	Transaction ID: INCA101022
	SCOTTSDALE FEC ID number of contributing federal political committee.	AZ 85	5255	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENER	AL MGR	-
	Receipt For: Primary General Other (specify) <b>v</b>	Aggregate Year-te	o-Date ▼ 2300.00	
	SUBTOTAL of Receipts This Page (optional)		•	442.31
	TOTAL This Period (last page this line number on	ıly)		

				FOR LINE NUMBER: PAGE 383 / 434			
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)			
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12			
				13 14 15 16 17			
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
	MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)					
Α.	Full Name (Last, First, Middle Initial) MRS TAMARA WHITLEY	Date of Receipt					
	Mailing Address 5847 CLENDENIN AVE			M         /         D         D         /         Y			
	City	State	Zip Code	Transaction ID: INCA100778			
	DALLAS	TX 75228		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer ACCREDO HEALTH GROUP	Occupatio	on SINESS REQUIREMENTS				
	Receipt For:		e Year-to-Date V	_			
	Primary General			1			
	Other (specify) <b>v</b>	0 0	325.00				
в.	Full Name (Last, First, Middle Initial) MS KIM WILLIAMS			Date of Receipt			
	Mailing Address 24 PENNINGTON AVE			M = M         /         D = D         /         Y = Y = Y         Y           0 6         1 8         2 0 1 1			
	City	State	Zip Code	Transaction ID: INCA101181			
	COLONIA	NJ	07067	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PHA	n RMACY NETWORK MGMT				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼		650.00				
•	Full Name (Last, First, Middle Initial)			Data of Descript			
C.	MR CHRISTOPHER WILSON Mailing Address 2 TIFFANY ROAD			Date of Receipt			
	City	State	Zip Code	0 6 1 8 2 0 1 1 Transaction ID: INCA100986			
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MKT		-			
			e Year-to-Date V	1			
	Primary General Other (specify) ▼		650.00	]			
	SUBTOTAL of Receipts This Page (optional)			125.00			
			······				
	TOTAL This Period (last page this line number of	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 384 / 434         (check only one)			
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
Α.	Full Name (Last, First, Middle Initial) MS COLETTE WILSON	Date of Receipt					
	Mailing Address 16608 56TH PL W			06 / D D / Y Y Y Y 2011			
	City LYNNWOOD	State WA	Zip Code 98037	Transaction ID: INCA100914			
	FEC ID number of contributing federal political committee.	C	98037	Amount of Each Receipt this Period 25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n _ ACCT EXEC				
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 325.00	]			
в.	Full Name (Last, First, Middle Initial) MS BEVERLY WINKLER			Date of Receipt			
	Mailing Address 17 LYNWOOD RD	0 6 / D D / Y Y Y Y 0 1 8 / 2 0 1 1					
	City VERONA	State NJ	Zip Code 07044	Transaction ID: INCA101128			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period			
	Name of Employer MEDCO HEALTH SOLUTIONS		DRG DEV				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]			
C.	Full Name (Last, First, Middle Initial) JAMES WINTRAUB			Date of Receipt			
	Mailing Address 2166 BROADWAY AP	T 8F		M M / D D / Y Y Y Y 06 18 2011			
	City	State	Zip Code	Transaction ID: INCA101314			
	NEW YORK FEC ID number of contributing federal political committee.	C	10024	Amount of Each Receipt this Period 25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CRE	n ATIVE DEVELOPMENT				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	]			
	SUBTOTAL of Receipts This Page (optional)		······	75.00			
	TOTAL This Period (last page this line number o	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 385 / 434         (check only one)       X         X       11a       11b       11c       12
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may not be sold or used by any person name and address of any political committee to	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MARY JANE WISEMAN	Date of Receipt	
	Mailing Address 33 KNOLL ROAD	M         M         /         D         D         /         Y	
	City WAYNE	State Zip Code NJ 07470	Transaction ID: INCA101401
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 75.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP NURSING SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	
В.	Full Name (Last, First, Middle Initial) MR MICHAEL WISNIEWSKI Mailing Address 23 DRUID HILL DR		Date of Receipt
		Otata Zin Orada	06 18 2011
	City PARSIPPANY	State Zip Code NJ 07054	Transaction ID: INCA101190 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR CONTRACT ADMINISTRATIC	
	Primary General Other (specify) ▼	Aggregate Year-to-Date  325.00	
C.	Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN		Date of Receipt
	Mailing Address 145 WAUGHAW ROAD	,	M M / D D / Y Y Y Y 06 18 2011
	City TOWACO	State Zip Code	Transaction ID: INCA100924
	FEC ID number of contributing federal political committee.	NJ 07082	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCIAL & ANALYTICAL SVC	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)	•	150.00
	TOTAL This Period (last page this line number o	nly)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 386 / 434           (check only one)         11a           X         11a         11b         11c         12           I         13         14         15         16         17				
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)						
	> MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)				
<i>А</i> .	Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH	Date of Receipt					
	Mailing Address 43 AZALEA PLACE		0 6 1 8 Y Y Y Y 0 1 8 2 0 1 1				
	City	State Zip Code	Transaction ID: INCA100809				
	PISCATAWAY	NJ 08854	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	30.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR RRA					
	Receipt For:	Aggregate Year-to-Date ▼					
	Other (specify) ▼	390.00					
В.	Full Name (Last, First, Middle Initial) MRS TARA WOLCKENHAUER		Date of Receipt				
	Mailing Address 1730 DOGWOOD CRE	0 6 / D D / Y Y Y Y 0 6 1 8 2 0 1 1					
	City	State Zip Code	Transaction ID: INCA101001				
	GERMANTOWN	TN 38139	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer ACCREDO HEALTH GROUP	Occupation GROUP VP HR					
	Receipt For:	Aggregate Year-to-Date					
	Primary     General       Other (specify) ▼	650.00					
с.	Full Name (Last, First, Middle Initial) MS CYNTHIA WOOD		Date of Receipt				
	Mailing Address 4002 FALCON LAKE D	)R	M M / D D / Y Y Y Y 06 18 2011				
	City	State Zip Code	Transaction ID: INCA101116				
	ARLINGTON	TX 76016	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PROFESS PRACTICES POLICIE	S				
	Receipt For: Primary General	Aggregate Year-to-Date					
	Other (specify) ▼	325.00					
	SUBTOTAL of Receipts This Page (optional)		105.00				
	TOTAL This Period (last page this line number of						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 387 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person a name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS JUDITH WOOD		Date of Receipt
	Mailing Address 76 COLONIAL ROAD		M         M         /         D         D         /         Y
		State Zip Code	Transaction ID: INCA101180
	STILLWATER FEC ID number of contributing federal political committee.	NY 12170	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT OPS	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
в.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER WOODYARD Mailing Address 538 RAVEN CIRCLE		Date of Receipt
	City	State Zip Code	
	BROWNSBURG	IN 46112	Transaction ID: INCA101079 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
С.	Full Name (Last, First, Middle Initial) MR SERGEY YANITSKIY		Date of Receipt
	Mailing Address 793 LINCOLN AVE		0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA100871
	POMPTON LAKES FEC ID number of contributing federal political committee.	NJ 07442	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)		62.50
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 388 / 434
	· · ·	Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
		,,	13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	> MEDCO HEALTH SOLUTIONS INC. F	Medco Health PAC)	
Α.	Full Name (Last, First, Middle Initial) MS SARAH YINGLING		Date of Receipt
	Mailing Address 901 ST MARKS AVE	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA101002
	WESTFIELD	NJ 07090	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MEDICARE OPS	-
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary General	325.00	
	Other (specify)		
в.	Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR		Date of Receipt
	Mailing Address 219 SPOOK ROCK RI	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: INCA101090
	SUFFERN	NY 10901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & CHIEF INFO OFFICER	
	Receipt For:	Aggregate Year-to-Date	
	Primary General Other (specify) ▼	1220.00	
	Full Nome (Least First Middle Initial)		
C.	Full Name (Last, First, Middle Initial) MS JILL ZELMAN		Date of Receipt
	Mailing Address 43604 EMERALD DUN	NES PL	0 6 1 8 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101146
	LEESBURG	VA 20176	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	450.00	
	Other (specify) ▼		
	SUBTOTAL of Receipts This Page (optional)	۱	267.50
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 389 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ANATOLY ZHELEZNYAK			Date of Receipt
	Mailing Address 5 DENISE COURT			0 6 / D D / Y Y Y Y 2 0 1 1
	City MANALAPAN	State NJ	Zip Code 07726	Transaction ID: INCA101231
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	n CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
в.	Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI			Date of Receipt
	Mailing Address 6691 DEERVIEW DRIV	0 6 / D D / Y Y Y Y 0 1 8 2 0 1 1		
	City LOVELAND	State OH	Zip Code 45140	Transaction ID: INCA100970 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
C.	Full Name (Last, First, Middle Initial) MR ANTHONY ZOLFO			Date of Receipt
	Mailing Address 217 FOREST RIDGE C	OURT		0 6 / Y Y Y Y 0 6 1 8 2 0 1 1
		State	Zip Code	Transaction ID: INCA101254
	FRANKLIN LAKES FEC ID number of contributing federal political committee.	NJ C	07417	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 390 / 434           (check only one)         X           X         11a         11b         11c         12
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	13     14     15     16     17       on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F			
А.	Full Name (Last, First, Middle Initial) MS MICHELE AGNEW			Date of Receipt
	Mailing Address 2433 ANDERSON PAF	0 6 / 2 5 / Y Y Y 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101459
	HENDERSON	NV	89044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR HR	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	325.00	
В.	Full Name (Last, First, Middle Initial) MR JOHN AHLER			Date of Receipt
	Mailing Address 2677 SKELTON LANE	0 6 / D D / Y Y Y Y 0 6 2 5 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101927
	BLACKLICK,	OH	43004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n ARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 325.00	]
C.	Full Name (Last, First, Middle Initial) MS CARMEN BERG			Date of Receipt
	Mailing Address P O BOX 1373			
	City	State	Zip Code	Transaction ID: INCA101816
	MEDICAL LAKE	WA	99022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS		ARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 325.00	]
	SUBTOTAL of Receipts This Page (optional)			37.50
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 391 / 434     (check only one)   11c     X   11a
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to s	13     14     15     16     17       a for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
<b>A</b> .	Full Name (Last, First, Middle Initial) MR ANDREW BIDINOTTO	Date of Receipt	
	Mailing Address 7728 GRACE DRIVE		0 6 / D D / Y Y Y Y 2 0 1 1
	City	State Zip Code	Transaction ID: INCA101494
	NORTH RICHLAND HIL	TX 76182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS PROCESS CHAMPION	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	325.00	
в.	Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO		Date of Receipt
	Mailing Address 26 DAYLILY DRIVE		0 6 2 5 Y Y Y Y 0 1 1
	City	State Zip Code	Transaction ID: INCA101957
	MOUNT LAUREL	NJ 08054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP HR	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	650.00	
с.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX		Date of Receipt
	Mailing Address 6527 SHORBURGH DF	RIVE	0 6 2 5 Y Y Y Y 0 1 1
	City	State Zip Code	Transaction ID: INCA101442
	INDIANAPOLIS	IN 46278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 650.00	
	SUBTOTAL of Receipts This Page (optional)	····· •	62.50
	TOTAL This Period (last page this line number of	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 392 / 434         (check only one)       Image: Compare the state of th
	Any information copied from such Reports and St or for commercial purposes, other than using the	name and ad	y not be sold or used by any perso dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
, A.	Full Name (Last, First, Middle Initial) MR MARVEN CHIN	Date of Receipt		
	Mailing Address 1604 SNOWBERRY D	0 6 / <sup>D</sup> 2 5 / <sup>Y</sup> 2 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101936
	WILLIAMSTOWN	NJ	08094	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR QUA		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		325.00	]
В.	Full Name (Last, First, Middle Initial) MRS MARLENE CLEMENT			Date of Receipt
	Mailing Address 42 MESQUITE VILLAG	0 6 2 5 Y Y Y Y Y 0 1 1		
	City	State	Zip Code	Transaction ID: INCA101645
	HENDERSON	NV	89012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CUS		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	325.00	
С.	Full Name (Last, First, Middle Initial) MR JASON COLE			Date of Receipt
	Mailing Address 14917 E BELLA VISTA	١		0 6 / D D / Y Y Y Y 0 6 / 2 5 / 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101661
	VERADALE	WA	99037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		650.00	
	SUBTOTAL of Receipts This Page (optional)		••••••	50.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 393 / 434           (check only one)			
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full)	r for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)			
A.	Full Name (Last, First, Middle Initial) MR PATRICK DENNIS			Date of Receipt			
	Mailing Address 2344 FRENCH ALPS A	VE.		0 6 / 2 5 / Y Y Y Y			
	City	State	Zip Code	Transaction ID: INCA101571			
	HENDERSON	NV	89044	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	bn				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	650.00				
- В.	Full Name (Last, First, Middle Initial) MS TAMARA DIDYK			Date of Receipt			
	Mailing Address 136 BEAVER RUN RD	0 6 / 2 5 / Y Y Y Y 0 1 1					
	City	State	Zip Code	Transaction ID: INCA101727			
		NJ	07848	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		12.50			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR ENT	n FERPRISE OPS				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	,			
	Other (specify) ▼	0 0	325.00				
- C.	Full Name (Last, First, Middle Initial) WILLIS DINGLE			Date of Receipt			
	Mailing Address 905 SW SCRUB OAK			0 6 / 2 5 / Y Y Y Y Y 0 1 1			
	City PALM CITY	State FL	Zip Code	Transaction ID: INCA101575			
	FEC ID number of contributing		34990	Amount of Each Receipt this Period			
	federal political committee.	C		100.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	HR				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0.0	1300.00				
ſ	SUBTOTAL of Receipts This Page (optional)		·····	137.50			
	TOTAL This Period (last page this line number of	only)	·····				

ITEMIZED RECEIPTS       Use separate schedule(s) for each category of the Detailed Summary Page       (check only one)         Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee to solicit contributi	12 16 17 16 17 utions ittee.
ITEMIZED RECEIPTS       for each category of the Detailed Summary Page       X 11a 11b 11c 15         Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes.         Full Name (Last, First, Middle Initial)       Mailing Address 16 E HOMESTEAD AVE       Date of Receipt         Mailing Address       16 E HOMESTEAD AVE	16 17 utions
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such commercial purposes.         A.       Full Name (Last, First, Middle Initial)       Date of Receipt       Date of Receipt         Mailing Address       16 E HOMESTEAD AVE       Mailing Address       Date of Receipt       Transaction ID: INCA101690         City       State       Zip Code       Transaction ID: INCA101690       Amount of Each Receipt this Principle	16 17 utions
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee to solicit contributice to solicit contributions from such committee to solic	utions ittee.
MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)         Full Name (Last, First, Middle Initial)         MS LYNDA DOREMUS         Mailing Address       16 E HOMESTEAD AVE         City       State       Zip Code         COLLINGSWOOD       NJ       08108	
A.       Full Name (Last, First, Middle Initial) MS LYNDA DOREMUS       Date of Receipt         Mailing Address       16 E HOMESTEAD AVE       0 6 2 5 2 2         City       State       Zip Code         COLLINGSWOOD       NJ       08108	
A.       MS LYNDA DOREMUS       Date of Receipt         Mailing Address       16 E HOMESTEAD AVE       0 6       2 5       2         City       State       Zip Code       Transaction ID: INCA101690         COLLINGSWOOD       NJ       08108       Amount of Each Receipt this Press	
City     State     Zip Code     Transaction ID:     INCA101690       COLLINGSWOOD     NJ     08108     Amount of Each Receipt this Press	
COLLINGSWOOD NJ 08108 Amount of Each Receipt this P	0 1 1
	3
	eriod
FEC ID number of contributing federal political committee.	25.00
Name of Employer MEDCO HEALTH SOLUTIONS DIR PHARM PRACTICE	
Receipt For: Aggregate Year-to-Date V	
Primary General	
Other (specify) ▼ 650.00	
Full Name (Last, First, Middle Initial)       Date of Receipt         B.       KELLY ELLIS       Date of Receipt	
Mailing Address 106 HENRY SEWALL WAY	0 1 1
City State Zip Code Transaction ID: INCA10209	
STUART FL 34996 Amount of Each Receipt this Po	
	25.00
Name of Employer     Occupation       MEDCO HEALTH SOLUTIONS     SR DIR MARKETING	
Receipt For: Aggregate Year-to-Date V	
Primary       General         Other (specify)       ▼	
Full Name (Last, First, Middle Initial)     Date of Receipt	
Mailing Address 2354 DOLPHIN CT	0 1 1
City State Zip Code Transaction ID: INCA101680	C
HENDERSON NV 89074 Amount of Each Receipt this Po	əriod
FEC ID number of contributing federal political committee.	15.00
Name of Employer     Occupation       MEDCO HEALTH SOLUTIONS     DIR PHARM PRACTICE	
Receipt For: Aggregate Year-to-Date V	
Primary     General       Other (specify)     ▼	
SUBTOTAL of Receipts This Page (optional)	5.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 395 / 434         (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
А.	Full Name (Last, First, Middle Initial) MR JOHN FORD	Date of Receipt		
	Mailing Address 6 SILVER LAKE DRIV	/E		0 6 / 2 5 / Y Y Y Y 0 1 1
	City SHAMONG	State	Zip Code	Transaction ID: INCA101699
	FEC ID number of contributing federal political committee.	C	08088	Amount of Each Receipt this Period 15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 390.00	
- B.	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO Mailing Address 9 GREEN HILL TRAIL	-		Date of Receipt
	City	State	Zip Code	Transaction ID: INCA101751
	TROPHY CLUB	ТХ	76262	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1	TIONAL SERVICE CENTER	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date 2600.00	]
- C.	Full Name (Last, First, Middle Initial) MR ROBERT GIBBS			Date of Receipt
	Mailing Address 544 DENMOOR COU	RT		0 6 / D D / Y Y Y Y 0 6 25 2011
	City	State	Zip Code	Transaction ID: INCA101500
	GALLOWAY FEC ID number of contributing federal political committee.	ОН	43119	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR OPS		-
	Receipt For: Primary General Other (specify) $rightarrow$	Aggregate	e Year-to-Date V 325.00	]
ſ	SUBTOTAL of Receipts This Page (optional) .			127.50
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 396 / 434           (check only one)	
	Any information copied from such Reports and Si or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
⊻ A.	Full Name (Last, First, Middle Initial) FRANK HARVEY	Date of Receipt		
	Mailing Address 154 SW PALM COVE I	M M / D D / Y Y Y Y 06 25 2011		
	City	State Zip Code	Transaction ID: INCA102089	
		FL 34990	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP & CHIEF MARKETING OFFICER		
	Receipt For:	Aggregate Year-to-Date V	-	
	Other (specify) ▼	650.00		
– В.	Full Name (Last, First, Middle Initial) MR JOHN HOLLINGER		Date of Receipt	
	Mailing Address 784 CAPE HENRY DR		0 6 / <sup>D</sup> 2 5 / <sup>Y</sup> Y Y Y Y 0 1 1	
	City	State Zip Code	Transaction ID: INCA101738	
	COLUMBUS	OH 43228	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	10.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS PLANNING		
	Receipt For: Primary General	Aggregate Year-to-Date V		
	Other (specify)	260.00		
– C.	Full Name (Last, First, Middle Initial) MR BERNARD HUKILL		Date of Receipt	
	Mailing Address 17219 CLOVIS		M M / D D / Y Y Y Y 06 25 2011	
	City	State Zip Code	Transaction ID: INCA101781	
	HELOTES	TX 78023	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM OPS		
	Receipt For: Primary General	Aggregate Year-to-Date V		
	Other (specify)	1300.00		
Γ	SUBTOTAL of Receipts This Page (optional)		110.00	
	TOTAL This Period (last page this line number of	only)		
	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 397 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
----	--	--	---	--
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) LINDA ISHAM	Date of Receipt		
	Mailing Address 1644 SE BALLANTRAE	EBLVD		0 6 2 5 Y Y Y Y Y 2 0 1 1
	City PORT ST LUCIE	State FL	Zip Code	Transaction ID: INCA101683
	FEC ID number of contributing federal political committee.	C	34952	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR BUS	n SINESS PLANNING	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
в.	Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12224 MONTCALM ST	REET		Date of Receipt
	City	State	Zip Code	0 6 2 5 2 0 1 1 Transaction ID: INCA101807
	CARMEL	IN	46032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupatio VP/GM		
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]
С.	Full Name (Last, First, Middle Initial) MR DENNIS KACKLEY			Date of Receipt
	Mailing Address 32 EAST RIVERGLEN	DR		0 6 2 5 Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: INCA101741
	WORTHINGTON FEC ID number of contributing federal political committee.	OH C	43085	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CUS		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)		······	62.50
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 398 / 434           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷ A.	Full Name (Last, First, Middle Initial) MR BRICE LOVE	Date of Receipt		
	Mailing Address 2390 BRANDON RD			0 6 / 2 5 / Y Y Y Y
	City	State	Zip Code	Transaction ID: INCA101666
	<u>COLUMBUS</u>	OH	43221	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0.0	325.00	
- В.	Full Name (Last, First, Middle Initial) MR ROSS LUCE	I		Date of Receipt
	Mailing Address 1066 WEST GROVE (	M         /         D         D         Y		
	City	State	Zip Code	Transaction ID: INCA101566
	GIBSONIA FEC ID number of contributing	PA C	15044	Amount of Each Receipt this Period 30.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	780.00	]
- C.	Full Name (Last, First, Middle Initial) ROBERT MARK	1		Date of Receipt
	Mailing Address 1976 NE RIVER COUI	RT		M M / D D / Y Y Y Y 06 25 2011
		State	Zip Code	Transaction ID: INCA102078
	JENSEN BEACH FEC ID number of contributing	FL	34957	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n IIEF SALES OFFICER	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0.0	650.00	
ſ	SUBTOTAL of Receipts This Page (optional)			92.50
ŀ	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 399 / 434         (check only one)       11c         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	solicit contributions from such committee.	
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ERIC MCPHERSON	Date of Receipt	
	Mailing Address 15008 EAGLEPARK P	L	0 6 / <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>Y</sup>
	City	State Zip Code	Transaction ID: INCA101852
		FL 33547	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	_
	Receipt For:	Aggregate Year-to-Date V	-
	Primary     General       Other (specify) ▼	325.00	
- В.	Full Name (Last, First, Middle Initial) EDWARD MERIWETHER		Date of Receipt
	Mailing Address 5858 SALISBURY DR.		06 / 25 / Y Y Y Y 011 / 25 / 2011
	City	State Zip Code	Transaction ID: INCA102085
		VA 24018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM CALL CENTER OPS	
	Receipt For:	Aggregate Year-to-Date V	
	Primary     General       Other (specify)	650.00	
– C.	Full Name (Last, First, Middle Initial) BRYAN MERRYMAN	L	Date of Receipt
•	Mailing Address 4102 PARKSIDE DRIV	Έ	
	City JUPITER	State Zip Code FL 33458	Transaction ID: INCA102024
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP STRATEGIC SUPPORT	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	
	SUBTOTAL of Receipts This Page (optional)	•	102.50
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 400 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions of solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) PHILLIP MONACO	Date of Receipt		
	Mailing Address 835 NE STOKES TERF	1		M         M         /         D         D         /         Y
		State FL	Zip Code	Transaction ID: INCA102083
	JENSEN BEACH FEC ID number of contributing federal political committee.	C	34957	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n NRMACY PRACTICES	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
в.	Full Name (Last, First, Middle Initial) KEVIN NESS Mailing Address 3872 SW RAMSPECK	et.		Date of Receipt
		0 6 / 2 5 / Y Y Y Y 0 1 1		
	City PORT ST. LUCIE	State FL	Zip Code 34953	Transaction ID: INCA102077
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	-	OLUTIONS ARCHITECT	
	Primary General Other (specify) <b>v</b>	Aggregate	e Year-to-Date 325.00	]
C.	Full Name (Last, First, Middle Initial) MR BRYAN OLENIK			Date of Receipt
	Mailing Address 22212 N. 36TH ST			0 6 2 5 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA101823
	PHOENIX FEC ID number of contributing federal political committee.	AZ	85050	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n ARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]
	SUBTOTAL of Receipts This Page (optional)		I	62.50
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 401 / 434           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17		
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N				
Α.	Full Name (Last, First, Middle Initial) MR JUN PARK	Date of Receipt				
	Mailing Address 2843 HONEYSUCKLE	LANE		M         M         /         D         D         /         Y		
	City HILLIARD	State OH	Zip Code 43026	Transaction ID: INCA101931		
	FEC ID number of contributing federal political committee.	C	43020	Amount of Each Receipt this Period 12.50		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio BUSINE	n SS PROCESS CHAMPION			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	]		
в.	Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS Mailing Address 2780 FOLKSTONE RC	AD		Date of Receipt		
	City	State	Zip Code			
	<u>COLUMBUS</u>		43220	Transaction ID: INCA101524 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupatio VP/GM		_		
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date 650.00	]		
с.	Full Name (Last, First, Middle Initial) ARLENE PERAZELLA			Date of Receipt		
-	Mailing Address 600 NE BAYBERRY LA	NE		0 6 2 5 2 0 1 1		
		State	Zip Code	Transaction ID: INCA102076		
	JENSEN BEACH FEC ID number of contributing federal political committee.	FL C	34957	Amount of Each Receipt this Period		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM 0	n DPERATIONS	_		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]		
	SUBTOTAL of Receipts This Page (optional)			87.50		
	TOTAL This Period (last page this line number of	only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 402 / 434         (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MARK POOLE	Date of Receipt		
	Mailing Address 400 HILLANDALE DR	0 6 2 5 2 0 1 1		
	City TROUTVILLE	State VA	Zip Code 24175	Transaction ID: INCA102091 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PAT	n TENT SERVICES	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
В.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL			Date of Receipt
	City	State	Zip Code	0 6 2 5 2 0 1 1 Transaction ID: INCA101906
	KELLER	ТХ	76248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR HR	on	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date 🔻 650.00	]
C.	Full Name (Last, First, Middle Initial) MRS JENNIFER ROBERTS			Date of Receipt
	Mailing Address 1342 DALTON CT			M M / D D / Y Y Y Y 06 25 2011
	City FAIRFIELD	State OH	Zip Code	Transaction ID: INCA101569
	FEC ID number of contributing federal political committee.	С	45014	Amount of Each Receipt this Period 12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 325.00	]
	SUBTOTAL of Receipts This Page (optional)			62.50
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 403 / 434         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	a. Medco Health PAC)	
A.	Full Name (Last, First, Middle Initial) CHRISTOPHER RYAN	Date of Receipt	
	Mailing Address 7690 HUMMINGBIRD	COURT	0 6 / D D / Y Y Y Y 2 5 / 2 0 1 1
	City	State Zip Code	Transaction ID: INCA102082
		FL 33412	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary     General       Other (specify) ▼	325.00	]
- В.	Full Name (Last, First, Middle Initial) FRANCIS SCHULTE		Date of Receipt
	Mailing Address 5023 SW BERMUDA V	VAY	M M / D D / Y Y Y Y 06 25 2011
	City	State Zip Code	Transaction ID: INCA101596
	PALM CITY	FL 34990	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC OPS OFFICER	_
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	650.00	]
- C.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III	I	Date of Receipt
	Mailing Address 1767 FAIRMOUNT ST	REET	M M / D D / Y Y Y Y 06 25 2011
	City	State Zip Code	Transaction ID: INCA101719
	CARMEL	IN 46032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ONCOLOGY TRC OPS	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	780.00	
	SUBTOTAL of Receipts This Page (optional)		105.00
ŀ	<b>TOTAL</b> This Period (last page this line number		
		,	

6				FOR LINE NUMBER: PAGE 404 / 434				
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s for each category of the					
I	TEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
Г				13 14 15 16 17				
1	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	person for the purpose of soliciting contributions ee to solicit contributions from such committee.						
Γ	NAME OF COMMITTEE (In Full)	NAME OF COMMITTEE (In Full)						
	MEDCO HEALTH SOLUTIONS INC. P	.k.a. Medco Health PAC)						
A.	Full Name (Last, First, Middle Initial) MR MARK SHINKLE	Date of Receipt						
	Mailing Address 4464 REPASS DRIVE	0 6 / D / Y Y Y Y 2 5 / 2 0 1 1						
	City	State	Zip Code	Transaction ID: INCA101557				
	WESTFIELD	IN	46074	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		12.50				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	on SINESS PLANNING					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General	i i	325.00					
	Other (specify) 🔻			·				
- В.	Full Name (Last, First, Middle Initial) MR ERIC SMITHER			Date of Receipt				
	Mailing Address 1132 NORTH ST RT 12	23		0 6 / D D / Y Y Y Y 2 5 / 2 0 1 1				
	City	State	Zip Code	Transaction ID: INCA101576				
	LEBANON	OH	45036	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		12.50				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS						
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify)		325.00					
_	Full Name (Last, First, Middle Initial)							
C.	JOHN STAINES			Date of Receipt				
	Mailing Address 4442 SE WATERFORD	DR.		$\begin{array}{c} M & M \\ 0 & 6 \end{array} / \begin{array}{c} D & D \\ 2 & 5 \end{array} / \begin{array}{c} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{array}$				
	City	State	Zip Code	Transaction ID: INCA102025				
	STUART	FL	34997	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LIBE	on RTY HUMAN RESOURC	ES				
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼		650.00					
-		0 0	0 0 0 0 0 0 0					
	SUBTOTAL of Receipts This Page (optional)			▶ 75.00				
	TOTAL This Period (last page this line number o	only)						

ę	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 405 / 434
			for each category of the	
•			Detailed Summary Page	X 11a 11b 11c 12
Γ	Any information copied from such Reports and St	n for the purpose of soliciting contributions		
	or for commercial purposes, other than using the	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT	Date of Receipt		
	Mailing Address 8362 GOLDEN PRAIRI	06 / <sup>D</sup> <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>		
	City	State	Zip Code	Transaction ID: INCA101597
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n	-
		VP/GM		_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)		650.00	
		0 0		
в.	Full Name (Last, First, Middle Initial) TIM TIDD			Date of Receipt
	Mailing Address 10302 S FEDERAL HW PO BOX 266	0 6 / <sup>D</sup> D D / <u>Y Y Y Y</u> 2 5 2 0 1 1		
	City State		Zip Code	Transaction ID: INCA101706
	PORT ST LUCIE	FL	34952	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM F	n PATIENT SVCS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	650.00	
– C.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Date of Receipt
0.	Mailing Address 5 APPLE ORCHARD R	D		M M / D D / Y Y Y Y
	City	State	Zip Code	06 25 2011
	MOORESTOWN	NJ	08057	Transaction ID: INCA101731 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)		1300.00	
			0 0 0 0 0 0 0	
Γ	SUBTOTAL of Receipts This Page (optional)			125.00
┝	SUBTUTAL OF NECEIPIS THIS Fage (uptional)			
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 406 / 434         (check only one)       11c         X       11a       11b       11c       12         12       14       15       16       17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)			
۷ A.	Full Name (Last, First, Middle Initial) DENISE WEISS	Date of Receipt				
	Mailing Address 1590 SW PROSPERIT	мм/ D D / Y Y Y Y 06 25 2011				
	City	State Zip Code	Transaction ID: INCA102079			
	PALM CITY	FL 34990	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR QUALITY & TRAINING				
	Receipt For:	Aggregate Year-to-Date 🔻				
	Other (specify)	325.00				
в.	Full Name (Last, First, Middle Initial) GRETA WELEBOB		Date of Receipt			
	Mailing Address 2044 NW CHENILLE L	ANE	0 6 2 5 Y Y Y Y 0 1 1			
	City	State Zip Code	Transaction ID: INCA102080			
	STUART	FL 34994	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MARKETING	_			
	Receipt For: Primary General	Aggregate Year-to-Date ▼				
	Other (specify)	225.00				
- C.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER WOODYARD		Date of Receipt			
	Mailing Address 538 RAVEN CIRCLE		0 6 2 5 2 0 1 1			
	City	State Zip Code	Transaction ID: INCA101745			
	BROWNSBURG	IN 46112	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		12.50			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00				
ſ	SUBTOTAL of Receipts This Page (optional)	·····	62.50			
ŀ	TOTAL This Period (last page this line number	only)				

SCHEDULE A (FEC Forr ITEMIZED RECEIPTS	<b>n 3X)</b> Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 407 / 434           (check only one)					
Any information copied from such Rep or for commercial purposes, other than	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to s						
NAME OF COMMITTEE (In Full)							
Full Name (Last, First, Middle Initial MR JAMES ZIRPOLI	Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI						
Mailing Address 6691 DEERVI	Mailing Address 6691 DEERVIEW DRIVE						
City	State Zip Code	Transaction ID: INCA101636					
LOVELAND	OH 45140	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	25.00					
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM						
Receipt For:	Aggregate Year-to-Date ▼	_					
Primary     General       Other (specify) ▼	650.00						
Full Name (Last, First, Middle Initial B. IVETTE ZUNIGA	)	Date of Receipt					
Mailing Address 7571 163 RD	COURT N.	M M / D D / Y Y Y Y 06 25 2011					
City	State Zip Code	Transaction ID: INCA102086					
PALM BEACH GARDENS	FL 33418	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	25.00					
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE						
Receipt For:	Aggregate Year-to-Date ▼						
Primary     General       Other (specify) ▼	325.00						
Full Name (Last, First, Middle Initial	l)	Date of Receipt					
Mailing Address 59 DEGRAY	TERRACE	M M / D D / Y Y Y Y 06 30 2011					
City	State Zip Code	Transaction ID: INCA101426					
MAHWAH	NJ 07430	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		325.00					
Name of Employer MEDCO HEALTH SOLUTIONS, INC.	Occupation SENIOR DIRECTOR						
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify) <b>v</b>	325.00						
SUBTOTAL of Receipts This Page (	optional)	375.00					
	e number only)	55393.16					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 408 / 434           (check only one)         11a         11b         11c         12           13         14         15         X         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MENENDEZ FOR SENATE			Date of Receipt
	Mailing Address PO BOX 848			0 6 1 4 Y Y Y Y 1 1 4 2 0 1 1
	City	State	Zip Code	Transaction ID: INCA100049
	UNION CITY	NJ	07087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> coo	0264564	2000.00
	Name of Employer	Occupatio	n	
	Receipt For:     2012       X     Primary     General       Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	►	2000.00
TOTAL This Period (last page this line number only)	▶	2000.00

	SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check onl X 21b 27	E NUMBER: ly one) 22 23 23 28a 28b	PAGE 409 / 434 24 25 26 28c 29 30b
	Any Information copied from such Reports and or for commercial purposes, other than using th				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMIT	TEE (a.k.a. I	Medco Health PAC)	
Α.	Full Name (Last, First, Middle Initial) NIELSEN MERKSAMER PARRINEL Mailing Address 1415 L STREET, S			Transaction ID:EDate of Disburseme $06^{M}$ $06^{M}$ $15^{D}$	
	City SACRAMENTO	State Zip Code CA 95814		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement LEGAL AND ACCOUNTING SERVICES		001		351.50
	Candidate Name		Category/ Type		
	Office Sought: House D Senate President	bursement For: Primary General Other (specify) ▼			
	State: District:				

	SUBTOTAL of Disbursements This Page (optional)	•	351.50
	TOTAL This Period (last page this line number only)	►	351.50
i	FE6AN026		FEC Schedule B ( Form 3X) (Revised 02/2003)

	CHEDULE B (FEC Form 3X)	Use separate schedule	s)	-		-	R:	X       23       24       25       24         28b       28c       29       34         ose of soliciting contributions utions from such committee       34         alth PAC)       Image: Contribution of the second of th						
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	Inde Schedule(s) summary Page       (check only one)       22       X 23       24       25         21b       22       X 23       28b       28c       25         2 the sold or used by any person for the purpose of soliciting contributions from such committee s of any political committee to solicit contributions from such committee         TION COMMITTEE (a.k.a. Medco Health PAC)         Image: State of Disbursement         Image: State of Disbursement	29	3									
$\rangle$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COM	1ITTE	EE (a.I	k.a. M	edco H	leal	th PA	NC)					
	Full Name (Last, First, Middle Initial) CASTOR FOR CONGRESS					Date	of Di	sburs	ement	PB10	000	17		
	Mailing Address 301 WEST PLATT STR	EET, SUITE 385					М	D C	) <sup>D</sup> /2	Y	ž (	) <sup>1</sup> 1	Y	
	City Tampa		Amou	nt of	f Each	Disbu	rseme	ent	this F	eriod				
	Purpose of Disbursement		L.				2	250	0.00					
	Candidate Name KATHY CASTOR		C	ategor	y/									
	5 <u>X</u>		1											
	Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT HENRY HAI	NK JOHNSON						sburs	ement	PB10	000	20		
	Mailing Address 4262 CLAUSELL COUR		0 <sup>M</sup> 6	M	<sup>D</sup> C	<b>)</b> <sup>D</sup> <sup>/</sup>	Y	ž (	D Ì 1	Y				
	City Decatur												0	
	Purpose of Disbursement		L.				1	00	0.00					
	Candidate Name HENRY C JOHNSON JR	y/												
	5 <u>X</u>		- <b>I</b>											
	Full Name (Last, First, Middle Initial) FRIENDS OF CAROLYN MCCARTHY									PB10	000	21		
	Mailing Address 151 LINDEN ROAD					0 <sup>M</sup> 6	M	<sup>D</sup> C	) <sup>D</sup> /2	Y	ž (	D Ì 1	Y	
	City MINEOLA					Amou	nt ol	f Each	Disbu	rseme	ent	this F	eriod	
	Purpose of Disbursement		Γ	011		L.				1	00	0.00		
	Candidate Name CAROLYN MCCARTHY			ategor	y/									
			- <b>-</b>											
s	SUBTOTAL of Disbursements This Page (optional)				•					4	50	0.00		
т	OTAL This Period (last page this line number only	)			►									
E	6AN026					FE	C <b>S</b>	chedu	le B (I	orm	3X)	(Rev	/ised	

SCHEDULE B (FEC Form 3 ITEMIZED DISBURSEMENT	for each category of the Detailed Summary Page	21b 27	rone) 22 X 23 24 25 26 28a 28b 28c 29 30t
Any Information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and address of any political	committee to sol	icit contributions from such committee
Full Name (Last, First, Middle Initial) PRICE FOR CONGRESS Mailing Address PO BOX 425			Transaction ID: EXPB100018 Date of Disbursement
City Roswell	State Zip Code GA 30077		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name THOMAS EDMUNDS PRICE		011 Category/ Type	1000.00
Office Sought: X House Senate President State: GA District: 06	Disbursement For: 2012 X Primary General Other (specify) ▼	~~	
Full Name (Last, First, Middle Initial) TIM MURPHY FOR CONGRESS Mailing Address P.O. BOX 24551			Transaction ID: EXPB100019 Date of Disbursement
City PITTSBURGH	State Zip Code PA 15234		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name TIM MURPHY		011 Category/ Type	1000.00
Office Sought: X House Senate President State: PA District: 18	Disbursement For: 2012 X Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) 2011 SENATORS CLASSIC COM	MITTEE		Transaction ID: EXPB100040 Date of Disbursement
Mailing Address 228 SOUTH WA	SHINGTON STREET, SUITE		
City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Period
Purpose of Disbursement		011	10000.00
Candidate Name JOINT FUNDRAISING COMMITT	EE	Category/ Type	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		
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Full Name (Last, First, Middle Initial) CHARLES A. GONZALEZ CON	GRESSION	IAL CAMI	PAIGN						ion ID			1000	)29		
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Candidate Name JOHN A. BARRA		//												
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Candidate Name MARY LANDRIE				Category	//									
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Full Name (Last, First, Middle Initial) FRIENDS OF ROY BLUNT			Transaction ID: EXPB100037 Date of Disbursement							
Mailing Address P.O. BOX 50100			06 14 2011							
City SPRINGFIELD	State Zip Code MO 65905		Amount of Each Disbursement this Period							
Purpose of Disbursement		011	1000.00							
Candidate Name ROY BLUNT	didate Name Category									
Office Sought: X House Disk Senate President State: MO District: 07	ursement For: 2016 X Primary General Other (specify) ▼									
Full Name (Last, First, Middle Initial) GARDNER FOR CONGRESS 2012			Transaction ID: EXPB100028 Date of Disbursement							
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City LOVELAND	StateZip CodeCO80539		Amount of Each Disbursement this Period							
Purpose of Disbursement		011	2500.00							
Candidate Name CORY GARDNER		Category/ Type								
Office Sought: X House Disk Senate President State: CO District: 04	ursement For: 2012 X Primary General Other (specify) ▼									
Full Name (Last, First, Middle Initial) LOBIONDO FOR CONGRESS			Transaction ID: EXPB100031 Date of Disbursement							
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Candidate Name FRANK A. LOBIONDO		Category/ Type								
Office Sought: X House Disk Senate President State: NJ District: 02	Ursement For: 2012 X Primary General Other (specify) ▼									
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Full Name (Last, First, Middle Initial) MICHAEL BURGESS FOR CONG	RESS								100	025	
Mailing Address P.O. BOX 2334				0 <sup>M</sup> 6	М		14	4	2	201	1 <sup>Y</sup>
City DENTON	State Zip Code TX 76202			Amou	int o	f Each	ו D	isburse	mer	nt this	Period
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Office Sought: X House Senate President	Disbursement For: 2012 X Primary General Other (specify) ▼										
State: TX District: 26 Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRES:	S								100	033	
	ERY ST., STE. 610				_					201	1 <sup>Y</sup>
City SAN FRANCISCO	State Zip Code CA 94104			Amou	int o	f Each	ו D	isburse	mer	nt this	Period
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Candidate Name NANCY PELOSI		Catego Type	-								
Office Sought: X House Senate President	Disbursement For: 2012 X Primary General Other (specify)										
State: CA District: 08											
Full Name (Last, First, Middle Initial) RUSH HOLT FOR CONGRESS				Date	of D	isburs	en	nent			
Mailing Address P.O. BOX 782				0 <sup>M</sup> 6	м		14	<b>i</b>	2	201	1
City PENNINGTON	State Zip Code NJ 08534			Amou	int o	f Each	ו D	isburse			
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Full Name (Last, First, Middle Initial) SCOTT BROWN FOR US SENATE COMM	ITTEE		Transac Date of D			1000	39	
Mailing Address PO BOX 395			06	/ <b>1</b>	4 <sup>/</sup> Y	ž (	) <sup>1</sup> 1	Y
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Candidate Name SCOTT BROWN		Category/ Type						
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Full Name (Last, First, Middle Initial) TIM SCOTT FOR CONGRESS			Transac Date of D			1000	34	
Mailing Address 700 12TH STREET, NW,		06	/ D	<sup>D</sup> / Y	ž (	) ľ 1	Y	
	State Zip Code DC 20005		Amount	of Each	Disburse			eriod
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Candidate Name TIM SCOTT		Category/ Type						
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Full Name (Last, First, Middle Initial) UPTON FOR ALL OF US			Transact Date of D			1000	35	
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r for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL		
Full Name (Last, First, Middle Initial) FRIENDS OF JOE PITTS		Transaction ID: EXPB100717 Date of Disbursement
Mailing Address PO BOX 775		
City UNIONVILLE	StateZip CodePA19375	Amount of Each Disbursement this Perio
Purpose of Disbursement		011
Candidate Name JOSEPH R. PITTS		ategory/ Type
<b>°</b>	ement For: 2012 Primary General Other (specify) ▼	
Full Name (Last, First, Middle Initial) MORGAN GRIFFITH FOR CONGRESS	Transaction ID: EXPB100718 Date of Disbursement	
Mailing Address PO BOX 361		
City CHRISTIANSBURG	StateZip CodeVA24068	Amount of Each Disbursement this Perio
Purpose of Disbursement		011
Candidate Name MORGAN GRIFFITH		ategory/ Type
	ement For: 2012 Primary General Other (specify) ▼	
Full Name (Last, First, Middle Initial) PRESERVING AMERICA'S TRADITIONS	(PATPAC)	Transaction ID: EXPB100719 Date of Disbursement
Mailing Address 610 SOUTH BOULEVAR	RD	
City TAMPA	State Zip Code FL 33606	Amount of Each Disbursement this Perio
Purpose of Disbursement		011
Candidate Name LEADERSHIP PAC	Ca	ategory/ Type
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) <b>V</b>	
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	Mailing Address P.O. BOX 100828															
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	Senate President	ement For: Primary Other (spe	General													
	State: WI District:															
	Full Name (Last, First, Middle Initial) REPUBLICAN ASSEMBLY CAMPAIGN CO	OMMITTE	E				D	Transaction ID: EXPB100044 Date of Disbursement								
	Mailing Address 148 EAST JOHNSON S	TREET						$ \begin{array}{c} \begin{array}{c} M & M \\ \hline 0 & 6 \end{array} \end{array} \begin{array}{c} D & D \\ \hline 1 & 5 \end{array} \end{array} \begin{array}{c} T \\ \hline Y \\ \hline 2 \\ 0 \\ 1 \\ 1 \end{array} \begin{array}{c} Y \\ Y \\ \hline Y \\ \hline Y \\ \hline 2 \\ 0 \\ 1 \\ 1 \end{array} \begin{array}{c} Y \\ Y \\ \hline Y \\ Y \\$								
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	Candidate Name NON-FEDERAL CONTRIBUTION	Category/ Type														
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	Mailing Address 110 KING STREET, SUI	TE 203						06		L	15		2	0 Ì	1	
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NAME OF COMMITTEE (In Full)					
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Full Name (Last, First, Middle Initial) BARBARA BUONO FOR SENATE	Transaction ID: EXPB100740 Date of Disbursement				
Mailing Address 75 WOODBRIDGE AVENUE	$\begin{array}{c} \begin{array}{c} M \\ 0 \end{array} \begin{array}{c} 6 \end{array} \begin{array}{c} M \\ \end{array} \begin{array}{c} 7 \end{array} \begin{array}{c} D \\ 2 \end{array} \begin{array}{c} 2 \end{array} \begin{array}{c} D \\ \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ 2 \end{array} \begin{array}{c} Y \\ 2 \end{array} \begin{array}{c} Y \\ 1 \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ 1 \end{array} \begin{array}{c} Y \\ Y \end{array} \end{array} \begin{array}{c} Y \\ Y \end{array} \end{array} \begin{array}{c} Y \\ Y \end{array} \end{array} $				
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Purpose of Disbursement 011	2000.00				
Candidate Name Category/ NON-FEDERAL CONTRIBUTION Type					
Office Sought:     House     Disbursement For:     2011       Senate     Primary     X General       President     Other (specify)     ▼					
State: NJ District:					
Full Name (Last, First, Middle Initial) BOB GORDON FOR SENATE	Transaction ID: EXPB100743 Date of Disbursement				
Mailing Address 654 PLAZA ROAD NORTH	M       M       M       D       D       D       Y				
City     State     Zip Code       FAIRLAWN     NJ     07410					
Purpose of Disbursement 011	500.00				
Candidate Name Category/ NON FEDERAL CONTRIBUTION Type					
Office Sought:     House     Disbursement For:     2011       Senate     Primary     X General       President     Other (specify)     V					
State: NJ District:					
Full Name (Last, First, Middle Initial) CHIUSANO FOR ASSEMBLY	Transaction ID: EXPB100720 Date of Disbursement				
Mailing Address 18 PELLETOWN ROAD	$\begin{array}{c} \begin{array}{c} M \\ 0 \end{array} \begin{array}{c} 6 \end{array} \begin{array}{c} M \\ \end{array} \begin{array}{c} / \end{array} \begin{array}{c} D \\ 2 \end{array} \begin{array}{c} 2 \end{array} \begin{array}{c} D \\ \end{array} \begin{array}{c} / \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ 2 \end{array} \begin{array}{c} 0 \end{array} \begin{array}{c} Y \\ 1 \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ 1 \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ 1 \end{array} \begin{array}{c} Y \\ Y \end{array} \end{array} \begin{array}{c} Y \\ Y \end{array} \end{array} \begin{array}{c} Y \\ Y \end{array} \end{array} $				
City     State     Zip Code       AUGUSTA     NJ     07822	Amount of Each Disbursement this Period				
Purpose of Disbursement 011	250.00				
Candidate Name Category/ NON-FEDERAL CONTRIBUTION Type					
Office Sought:     House     Disbursement For:     2011       Senate     Primary     X General       President     Other (specify)     V					
State: NJ District:	· · · · · · · · · · · · · · · · · · ·				
SUBTOTAL of Disbursements This Page (optional)	2750.00				
TOTAL This Period (last page this line number only)					

TEMIZED DISBURSEMENTS	SCHEDULE B (FEC For	m 3X)				FO		INE NUMBER: PAGE 42							
Detailed Summary Page       21b       22b       23b       24b       25b         Ary Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soluting contributions from such committee         NAME OF COMMITTEE (in Full)         Med DCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medico Health PAC)         Full Name (Last, First, Middle Initial)         COMMITTEE TO ELECT L. GRACE SPENCER         Mailing Address       33 MORRSE AVENUE         Chy       State         Chy       State         Purpose of Disbursement       011         Cardidate Name       Disbursement For:       2011         Chice Sought:       House         District:       Disbursement For:       2011         Full Name (Last, First, Middle Initial)       Control       Control         COMMITTEE TO ELECT L. GRACE SPENCER       Transaction ID:       EXPB100730         Office Sought:       House       Disbursement For:       2011         State: NJ       District:       Disbursement For:       2011         Mailing Address       43 BOYDEN STREET       Transaction ID:       EXPB100730         Chy       State:       NJ       07017       Prival       Amount of Each Disbursement his Period <t< th=""><th></th><th>-</th><th></th><th></th><th></th><th></th><th>eck on</th><th></th><th></th><th></th><th></th><th></th><th></th></t<>		-					eck on								
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ar for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (in Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT L. GRACE SPENCER Mailing Address 33 MORRSE AVENUE  City Purpose of Disbursement Control Sector State Disbursement Gite Sought: House Disbursement Control State NJ O7017 Purpose of Disbursement Control State NJ O7017 Purpose of Disbursement Gity State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State State: NJ District: Full Name (Last, First, Middle Initial) Control State: NJ District: Full Name (Last, First, Middle Initial) Control State: NJ District: Full Name (Last, First, Middle Initial) Control State: NJ District: Full Name (Last, First, Middle Initial) Control State: NJ District: Full Name (Last, First, Middle Initial) Control State: NJ District: Full Name (Last, First, Middle Initial) Control State: NJ District: Full Name (Last, First, Middl	Any Information conied from such Ren	orts and State	ments may r	not be sold or user	hv :								-		
MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medoo Health PAC)         Full Name (Last, First, Middle Initial)         COMMITTEE TO ELECT L. GRACE SPENCER         Mailing Address       33 MORRSE AVENUE         City       State       Zip Code         Purpose of Disbursement       011         Candidate Name       NJ       07017         Purpose of Disbursement       011         Candidate Name       Disbursement For:       2011         Conducts       First, Middle Initial)       Conter (specify)         Conducts       President       Disbursement For:       2011         Conducts       President       Other (specify)       Transaction ID:       EXPB100730         Conducts       President       Disbursement For:       2011       Amount of Each Disbursement         Collar       President       Other (specify)       Transaction ID:       EXPB100730         Collar       President       Other (specify)       Transaction ID:       EXPB100730         Date of Disbursement       Other (specify)       Transaction ID:       EXPB100730         Collar       State:       NJ       07017       Prepose of Disbursement       011         Candidate Name       ND       07017       Prepose of														,	
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COMMITTEE TO ELECT L. GRACE SPENCER       Date of Disbursement         Mailing Address       33 MORRSE AVENUE         City       State       Zip Code         Purpose of Disbursement       011         Candidate Name       011         Construction       Disbursement For:         Office Sought:       House         President       Disbursement For:         State: NJ       District:         President       Other (specify)         Mailing Address       43 BOYDEN STREET         City       State       Zip Code         NON-FEDERAL CONTRIBUTION       Other (specify)         Office Sought:       House       Disbursement For:         Office Sought:       House       Disbursement For:         Office Sought:       House       Disbursement For:         Other (specify)       State: NJ       Disbursement For:         City       Senate       President         State: NJ       Disbursement For:       2011 <td>MEDCO HEALTH SOLUTION</td> <td>IS INC. POL</td> <td>ITICAL AC</td> <td>CTION COMMI</td> <td>TTE</td> <td>E (a</td> <td>a.k.a. N</td> <td>Medco H</td> <td>lealt</td> <td>th PA</td> <td>C)</td> <td></td> <td></td> <td></td>	MEDCO HEALTH SOLUTION	IS INC. POL	ITICAL AC	CTION COMMI	TTE	E (a	a.k.a. N	Medco H	lealt	th PA	C)				
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EÁST ORANGE       NJ       07017         Purpose of Disbursement       011         Candidate Name       011         NON-FEDERAL CONTRIBUTION       011         Office Sought:       House         President       Other (specify)         State: NJ       District:         Full Name (Last, First, Middle Initial)       CONAWAY FOR ASSEMBLY         Mailing Address       907 MORGAN AVENUE         City       State         Purpose of Disbursement       011         Candidate Name       NJ         NON-FEDERAL CONTRIBUTION       08065         Purpose of Disbursement       011         Candidate Name       011         Category/       Type         Office Sought:       House         Disbursement For:       2011         General       011         Category/       Type         Office Sought:       House         Disbursement For:       2011	Mailing Address 43 BOYDEN	STREET						0 <sup>M</sup> 6	M /	2	8 / Y	ž	0 Ì 1	Y	
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State: NJ     District:       Full Name (Last, First, Middle Initial) CONAWAY FOR ASSEMBLY     Transaction ID: EXPB100758 Date of Disbursement       Mailing Address     907 MORGAN AVENUE       City     State     Zip Code NJ       PALMYRA     NJ       08065       Purpose of Disbursement       Candidate Name       Office Sought:     House       Disbursement For:     2011       Category/ Type       Office Sought:     House       Disbursement For:     2011       Other (specify)     Transaction ID:	Senate	Disburs	Primary	X General				1							
CONAWAY FOR ASSEMBLY       Initial data in the left of Disbursement         Mailing Address       907 MORGAN AVENUE         City       State       Zip Code         PALMYRA       NJ       08065         Purpose of Disbursement       011         Candidate Name       011         NON-FEDERAL CONTRIBUTION       011         Office Sought:       House         President       Other (specify)         State: NJ       District:	State: NJ District:		Uther (sp	ecity) 🔻											
City     State     Zip Code       PALMYRA     NJ     08065       Purpose of Disbursement     011       Candidate Name     011       Candidate Name     011       Candidate Name     011       Office Sought:     House       Disbursement For:     2011       Office Sought:     Primary       Y     General       Other (specify)								Date	of Dis	sburse	ement				
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Senate     Primary     X     General       President     Other (specify)     ▼		ION			Ca	atego	ory/								
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CHEDULE B (FEC Form 3X)		, FOR LINE	NUMBER: PAGE 422/434					
TEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	) (check only	/ one)					
	Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c x 29 3					
Any Information copied from such Reports and Staten	nents may not be sold or use							
r for commercial purposes, other than using the nam	e and address of any politica	I committee to so	licit contributions from such committee					
NAME OF COMMITTEE (In Full)								
MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMI	ITTEE (a.k.a. N	Iedco Health PAC)					
Full Name (Last, First, Middle Initial) CONNERS FOR ASSEMBLY			Transaction ID: EXPB100722 Date of Disbursement					
Mailing Address 907 MORGAN AVE.			$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} \end{array} \left( \begin{array}{c} D & D \\ 2 & 8 \end{array} \right) \left( \begin{array}{c} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{array} \right)$					
City PALMYRA	StateZip CodeNJ08065		Amount of Each Disbursement this Period					
Purpose of Disbursement		011	500.00					
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type						
Senate President	ement For: 2011 Primary X General Other (specify) ▼							
State: NJ District:								
Full Name (Last, First, Middle Initial) COYLE FOR ASSEMBLY			Transaction ID: EXPB100723 Date of Disbursement					
Mailing Address 55 VAN HOLTEN ROAD	)		$\begin{array}{c c} M & M \\ \hline 0 & 6 \end{array} & \begin{array}{c} / & D & D \\ \hline 2 & 8 \end{array} & \begin{array}{c} / & Y & Y & Y \\ \hline & 2 & 0 & 1 & 1 \end{array}$					
City BASKING RIDGE	State Zip Code NJ 07920		Amount of Each Disbursement this Period					
Purpose of Disbursement	NJ 07920		500.00					
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type						
Office Sought: House Disburse Senate President State: NJ District:	ement For: 2011 Primary X General Other (specify) ▼							
Full Name (Last, First, Middle Initial) ELECTION FUND OF ALEX DECROCE			Transaction ID: EXPB100725 Date of Disbursement					
Mailing Address 101 GIBRALTAR DRIVE	E, SUITE 1B		$\begin{bmatrix} M & M \\ 0 & 6 \end{bmatrix} \begin{pmatrix} D & D \\ 2 & 8 \end{pmatrix} \begin{pmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{pmatrix}$					
City MORRIS PLAINS	State Zip Code NJ 07950		Amount of Each Disbursement this Period					
Purpose of Disbursement		011	1250.00					
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type						
Office Sought: House Disburse								
Senate President								
Senate								
Senate President	Other (specify)	····· ►	2250.00					

SCHEDULE B (FEC Form 3 ITEMIZED DISBURSEMEN	EMENTS       Descriptions and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee than using the name and address of any political committee to solicit contributions from such committee trains in the name and address of any political contributions from such committee to solicit	y one) 22 23 24 25 26 28a 28b 28c X 29 30b	
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and address of any politica	l committee to so	licit contributions from such committee
Full Name (Last, First, Middle Initial) ELECTION FUND OF ASSEMBL Mailing Address PO BOX 2245	YMAN JOE CRYAN		
City UNION Purpose of Disbursement			Amount of Each Disbursement this Period 2250.00
Candidate Name NON-FEDERAL CONTRIBUTION Office Sought: House Senate President State: NJ District:	Disbursement For: 2011 Primary X General		
Full Name (Last, First, Middle Initial) ELECTION FUND OF JOAN QUI Mailing Address 348 FAIRMOUN			
City JERSEY CITY Purpose of Disbursement Candidate Name	NJ 07306	Category/	Amount of Each Disbursement this Period 500.00
NON-FEDERAL CONTRIBUTION Office Sought: House Senate President State: NJ District:	Disbursement For: 2011 Primary X General	і уре	
Full Name (Last, First, Middle Initial) • ELECTION FUND OF JOHN F. N	ICKEON FOR ASSEMBLY		
Mailing Address 4D3 SUSAN CC	DURT		$ \begin{array}{c} \stackrel{M}{\overset{O}} \stackrel{M}{\overset{M}} \\ 0 \\ 6 \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \stackrel{D}{\overset{D}} \stackrel{D}{\overset{D}} \\ 2 \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \end{array} \end{array} \begin{array}{c} \\ \end{array} \end{array} \end{array} \end{array} \end{array} \begin{array}{c} \\ \end{array} $
City WEST ORANGE			Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		Category/	500.00
Office Sought: House Senate President State: NJ District:	Disbursement For: 2011 Primary X General		
SUBTOTAL of Disbursements This Page	(optional)	····· •	3250.00
TOTAL This Period (last page this line nu	mber only)	►	

SCHEDULE B (FEC Form 3 ITEMIZED DISBURSEMEN	Use separate schedule(s)	FOR LINE (check only 21b	
Any Information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS II	and Statements may not be sold or used	committee to sol	icit contributions from such committee
Full Name (Last, First, Middle Initial) ELECTION FUND OF JOHN S. V Mailing Address 3145 BORDEN	VISNIEWSKI TOWN AVENUE, SUITE C1A		Transaction ID: EXPB100737 Date of Disbursement
City PARLIN Purpose of Disbursement	State Zip Code NJ 08859	011	Amount of Each Disbursement this Period
Candidate Name NON-FEDERAL CONTRIBUTION Office Sought: House Senate President	J Disbursement For: 2011 Primary X General Other (specify) ▼	Category/ Type	
State: NJ District: Full Name (Last, First, Middle Initial) ELECTION FUND OF JOSEPH F Mailing Address P.O. BOX 1467	. VITALE		Transaction ID: EXPB100756 Date of Disbursement
City WOODBRIDGE Purpose of Disbursement Candidate Name	State Zip Code NJ 07095	011 Category/	Amount of Each Disbursement this Period 1250.00
NON-FEDERAL CONTRIBUTION Office Sought: House Senate President State: NJ District:	Disbursement For: 2011 Primary X General Other (specify) ▼	Туре	
Full Name (Last, First, Middle Initial) • ELECTION FUND OF KEVIN J. (	D'TOOLE		Transaction ID: EXPB100747 Date of Disbursement
Mailing Address 40 EGGERS S	IREET		$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} \end{array} \begin{array}{c} \prime \\ \end{array} \begin{array}{c} D & D \\ 2 & 8 \end{array} \end{array} \begin{array}{c} \prime \\ \end{array} \begin{array}{c} Y \\ 2 & 0 & 1 & 1 \end{array} \begin{array}{c} Y \\ 2 & 0 & 1 & 1 \end{array}$
City EAST BRUNSWICK	State Zip Code NJ 08816		Amount of Each Disbursement this Period
Purpose of Disbursement		011	750.00
Candidate Name NON-FEDERAL CONTRIBUTION	J	Category/ Type	
Office Sought: House Senate President State: NJ District:	Disbursement For: 2011 Primary X General Other (specify) ▼		
SUBTOTAL of Disbursements This Page	(optional)	<b>)</b>	3000.00
TOTAL This Period (last page this line nu	mber only)	►	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 425 / 434					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Check only							
	Detailed Summary Page	21b 27	22 23 28a 28						
Any Information copied from such Reports and State									
or for commercial purposes, other than using the nam	e and address of any politica	l committee to sol	icit contributions	s from such committee					
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL		TTEE (aka N	ledco Health I	PAC					
/				17(0)					
Full Name (Last, First, Middle Initial) ELECTION FUND OF LORETTA WEINB	ERG FOR SENATE		Date of Disbu						
Mailing Address P.O. BOX 3392			06						
City TEANECK	StateZip CodeNJ07666		Amount of Ea	ach Disbursement this Peric					
Purpose of Disbursement		011		1250.00					
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type							
Senate President	ement For: 2011 Primary X General Other (specify) ▼								
State: NJ District:									
Full Name (Last, First, Middle Initial) ELECTION FUND OF NIA H. GILL			Date of Disbu						
Mailing Address 42 CHURCH STREET			06	<sup>D</sup> 28 / Y Y Y Y Y 2011					
City MONTCLAIR	StateZip CodeNJ07042		Amount of Ea	ach Disbursement this Peric					
Purpose of Disbursement		011	1000.00						
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type							
Senate President	ement For: 2011 Primary X General Other (specify) ▼								
State: NJ District: Full Name (Last, First, Middle Initial)									
ELECTION FUND OF PAUL SARLO			Transaction Date of Disbu						
Mailing Address 9 LINCOLN AVENUE			06	<sup>D</sup> 28 / Y Y Y Y Y 2011					
City RUTHERFORD	State Zip Code NJ 07070		Amount of Ea	ach Disbursement this Peric					
Purpose of Disbursement		011	<u> </u>	750.00					
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type							
Office Sought: House Disburs Senate President	ement For: 2011 Primary X General Other (specify) ▼								
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SCHEDULE B (FEC Form ITEMIZED DISBURSEMEN	Use separate schedule(s)	FOR LINE (check only 21b 27	NUMBER:         PAGE         426 / 434           y one)         22         23         24         25         26           28a         28b         28c         X         29         30b
Any Information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS		committee to so	licit contributions from such committee
Full Name (Last, First, Middle Initial) ELECTION FUND OF RICHARD Mailing Address 212 EDGEWO			Transaction ID: EXPB100741 Date of Disbursement
City LINDEN Purpose of Disbursement	State Zip Code NJ 07036	011	Amount of Each Disbursement this Period 500.00
Candidate Name NON FEDERAL CONTRIBUTIO Office Sought: House Senate	N Disbursement For: 2011 Primary X General	011 Category/ Type	
State: NJ District: Full Name (Last, First, Middle Initial) ELECTION FUND OF ROBERT	Other (specify)		Transaction ID: EXPB100752 Date of Disbursement
Mailing Address 3 NORTH DAK City JACKSON	OTA COURT State Zip Code NJ 08527		0 6     2 8     2 0 1 1       Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTIO	N	011 Category/ Type	500.00
Office Sought: House Senate President State: NJ District:	Disbursement For: 2011 Primary X General Other (specify) ▼		
Full Name (Last, First, Middle Initial) ELECTION FUND OF SCUTARI Mailing Address 20 KENNEDY			Transaction ID: EXPB100751 Date of Disbursement 0 6 <sup>M</sup> / <sup>D</sup> 2 8 / <sup>Y</sup> 2 0 1 1
City CLARK	State Zip Code NJ 07066		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTIO	N	011 Category/ Type	750.00
Office Sought: House Senate President State: NJ District:	Disbursement For: 2011 Primary X General Other (specify) ▼		
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	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedu for each category of t Detailed Summary Pa	he	FOR LINE 1 (check only 21b		_	AGE 42	5 26			
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	e and address of any po	litical cor	mmittee to soli	or the purpose of cit contribution	is from such		ons			
۷ <u>ـــ</u>	Full Name (Last, First, Middle Initial) FRIENDS OF CONNIE WAGNER Mailing Address 45 ESSEX STREET, SU	ITE 108 1ST FLO			Transaction Date of Disb						
	HÁCKENSACK Purpose of Disbursement	State Zip Code NJ 07601		011	Amount of E	ach Disburse	ement thi 500.				
	Candidate Name NON FEDERAL CONTRIBUTION Office Sought: House Disburse Senate President State: NJ District:	ement For: 2011 Primary X Gen Other (specify) ▼		Category/ Type							
3.	Full Name (Last, First, Middle Initial) FRIENDS OF DIANE ALLEN Mailing Address 650 MYRTLE AVE.				Transaction Date of Disb 0.6 /	<b>DID:</b> EXPB bursement $^{D}28$ /	100738				
	THORFARE Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION	State Zip Code NJ 08086		011 Category/ Type	Amount of E	ach Disburse	ement thi 500.				
	State: NJ District:	Primary X Gen Other (specify) <b>V</b>	eral		Tue:**		100742				
	FRIENDS OF RONALD L. RICE SENATE Mailing Address P.O. BOX 20037	CAMPAIGN COMM	TTEE		Date of Disb	DID: EXPB	100749				
	City NEWARK	State Zip Code NJ 07101			Amount of E	ach Disburse	ement thi	s Period			
	Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type								
	Office Sought: House Disburse Senate President State: NJ District:	ement For: 2011 Primary X Gen Other (specify) ▼	eral								
s	UBTOTAL of Disbursements This Page (optional)			►			1500.	00			
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						PAGE 428/434						
		NTS       Use sequate solutions breach category of the Detailed Summary Page       (check only one) 21b       23 23b       24 26 28b       25 26 30       68 30         is and Statements may not be sold or used by any person for the purpose of soliciting contributions sing the name and address of any political committee to solicit contributions from such committee       24 25 28b       24 26 26 26 26 26 27 26 28b       24 26 26 26 26 26 20 20 20 20 20 20 20 20 20 20 20 20 20										
TTEMIZED DISBURSEMENTS       Use separate schedules) braialed summary Page       (check only one) (check one) (chec												
	, , , , , , , , , , , , , , , , , , ,	DLITICAL ACTION	COMMITTE	EE (a.k.a. M	edco Health PAC)							
<u>ب</u> ۸.					Date of Disbursement							
	Mailing Address 706 HOLLY COURT				0.6 2.8	2011						
					Amount of Each Dis							
	Purpose of Disbursement			011		750.00						
	NON-FEDERAL CONTRIBUTION											
	Senate President	Primary X	General									
3.												
	Mailing Address PO BOX 492				$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} \\ \end{array} \begin{array}{c} P & 2 \\ \end{array} \begin{array}{c} P \\ 2 \\ \end{array} \begin{array}{c} P \\ 2 \\ \end{array} \begin{array}{c} P \\ 2 \\ \end{array} \begin{array}{c} Y \\ 2 \\ \end{array} \begin{array}{c} Y \\ 2 \\ \end{array} \begin{array}{c} Y \\ 1 \\ \end{array} \begin{array}{c} Y \\ Y \\ \end{array} \begin{array}{c} Y \\ Y \\ Y \\ \end{array} \begin{array}{c} Y \\ Y \\ Y \\ Y \\ Y \\ Y \end{array} \begin{array}{c} Y \\ Y $							
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	Senate	Primary X	General									
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	Mailing Address 1460 PROSPECT AVE	ENUE			06 <sup>M</sup> /28	Ý ŽOÍI						
					Amount of Each Dis	bursement this Period						
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	Senate President	Primary X	General									
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4	SUBTOTAL of Disbursements This Page (option	al)		····· <b>Þ</b>		1750.00						
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only 21b		PAGE 429/434				
	Detailed Summary Page	27	28a 28b	28c X 29 30				
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT	ICAL ACTION COMMIT	TEE (a.k.a. N	ledco Health PAC)					
Full Name (Last, First, Middle Initial) KEAN FOR SENATE			Transaction ID: E	ent				
Mailing Address P.O. BOX 425								
WÉSTFIELD	tate Zip Code JJ 07091		Amount of Each Dis	sbursement this Period				
Purpose of Disbursement		011	[	1250.00				
NON-FEDERAL CONTRIBUTION		Category/ Type						
	nent For: 2011 Primary X General Other (specify) ▼							
Full Name (Last, First, Middle Initial)			Transaction ID: EXPB100727					
LOUIS D. GREENWALD FOR ASSEMBLY			Date of Disburseme	ent / Y Y Y Y Y 2011				
Mailing Address 2240-15 ROUTE 70								
CHERRY HILL N	tate Zip Code JJ 08002		Amount of Each Dis	sbursement this Period				
Purpose of Disbursement		011	<u> </u>	1250.00				
Candidate Name NON FEDERAL CONTRIBUTION		Category/ Type						
	nent For: 2011 Primary X General Other (specify) ▼							
State: NJ District:								
Full Name (Last, First, Middle Initial)			Transaction ID:   E     Date of Disburseme	ent				
Mailing Address 121 OAK RIDGE AVENUE			0 6 <sup>M</sup> / 2 8	2011				
,	tate Zip Code NJ 07901		Amount of Each Dis	sbursement this Period				
Purpose of Disbursement		011		500.00				
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type						
	nent For: 2011 Primary X General Other (specify) ▼							
State: NJ District:	•							
SUBTOTAL of Disbursements This Page (optional)		►		3000.00				
TOTAL This Period (last page this line number only)								

SCHEDULE B (FEC	C Form 3X)			-	EOF					PAGE 430 / 434						
•	-		arate schedule(s)		FOR LIN (check or			п.		PAGE 43			J / 434			
ITEMIZED DISBUR	SEMENIS		category of the Summary Page	1	· .	21b [	22		23	24	$\square$	25				
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or for commercial purposes, of		me and addre	ss of any political	comr	nitte	e to sol	icit conti	ributio	ons fro	om such o	omm	nittee				
	,				_ ,					-						
MEDCO HEALTH SOL	UTIONS INC. PO	LITICAL AC	TION COMMI	TTEE	E (a.	k.a. N	ledco H	lealt	h PA	C)						
Full Name (Last, First, Mid	dle Initial)						Tropo	ootia		EXPB	100-	740				
POU FOR SENATE	,								sburse		1007	40				
Mailing Address P.O.	BOX 2696						06		2	0	2					
City		State	Zip Code				Amou	int of	Each	Disburse	ment	this F	Period			
Paterson		NJ	07509								-					
Purpose of Disbursement											100	00.00				
O a sullata Marsa				011		_										
Candidate Name NON-FEDERAL CON	RIBUTION				tegoi Type	у/										
Office Sought: Ho		sement For:	2011	<b>I</b>	700											
-	nate	Primary	X General													
	sident	Other (spe	ecify) 🔻													
State: NJ Distric																
Full Name (Last, First, Mid	,									EXPB	1007	732				
SCHAER NJ ASSEMB	LY							of Dis	sburse		V	V	V			
Mailing Address P.O.	BOX 5045						06	IVI /	ິ2	8 / Y	ź	0 <sup>1</sup> 1	T			
City PASSAIC		State NJ	Zip Code 07055				Amou	nount of Each Disbursement this Period								
Purpose of Disbursement			0,000	_		_	1000.00									
				(	011											
Candidate Name				Category/												
NON FEDERAL CONT		. =		Г	Гуре											
Office Sought:	use Disburg	sement For: Primary	2011 X General													
	sident	Other (spe														
State: NJ District			<i>,</i> , <b>,</b>													
Full Name (Last, First, Mid	dle Initial)						Trans	actio	on ID:	EXPB	1007	733				
SCHROEDER FOR AS	SSEMBLY						Date	of Dis	sburse	ement						
Mailing Address PO E	3OX 1407						0 <sup>M</sup> 6	M /	□2	D / Y	ž	0 <sup>1</sup> 1	Y			
FUE																
City		State	Zip Code				Amou	ransaction ID: EXPB100733 ate of Disbursement D = D = 0 / Y Y Y Y D = 0 / Y Z 0 1 1 mount of Each Disbursement this Period								
TOWNSHIP OF WASI	HIN	NJ	07676							i i	50	00.00				
Purpose of Disbursement					011						50	.00.00				
Candidate Name					tegoi	·v/										
NON-FEDERAL CONT	RIBUTION				Type											
Office Sought: Ho		sement For:	2011													
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SCHEDULE B (FEC Form 3	Use separate schedule(s		FOR LINE NUMBER: [FOR LINE NUMBER: ]				PAGE 431 / 434		
	Detailed Summary Page	21b 27	22 28a	23 28b	24 28c	X 29	9	26 30	
Any Information copied from such Reports or for commercial purposes, other than usir									
NAME OF COMMITTEE (In Full)									
MEDCO HEALTH SOLUTIONS II	NC. POLITICAL ACTION COMM	ITTEE (a.k.a.	Medco Heal	th PA	C)				
Full Name (Last, First, Middle Initial) STEVE SWEENEY FOR SENATI	Transacti Date of Di	isburse	ment		-	_			
Mailing Address 300 MARION A	VENUE		06	<sup>D</sup> 2	8 / Y	ž0	1 1	ſ	
City WENONAH	State Zip Code NJ 08090		Amount o	f Each	Disburse	ment th	is Pe	eriod	
Purpose of Disbursement		011	L			2250	.00		
Candidate Name NON-FEDERAL CONTRIBUTION	I	Category/ Type							
Office Sought: House Senate President	Disbursement For: 2011 Primary X General Other (specify) ▼								
State: NJ District:									
Full Name (Last, First, Middle Initial) THE SENATOR KYRILLOS COM	MITTEE		Transacti Date of Di	isburse	ment		-	7	
Mailing Address PO BOX 122			06	<sup>D</sup> 2	8 / Y	ž0	11		
City CEDAR GROVE	State Zip Code NJ 07009		Amount o	f Each	Disburse			eriod	
Purpose of Disbursement		011				1500	.00		
Candidate Name NON-FEDERAL CONTRIBUTION	l	Category/ Type							
Office Sought: House Senate President	Disbursement For: 2011 Primary X General	1							
State: NJ District:	Other (specify)								
Full Name (Last, First, Middle Initial) VAN DREW FOR SENATE			Transacti Date of Di	isburse	ment				
Mailing Address P.O. BOX 941			06	<sup>D</sup> 2	8 / Y	ž 0	11	ſ	
City CAPE MAY COURT HOU	State Zip Code NJ 08210		Amount o	f Each	Disburse	ment th	is Pe	eriod	
Purpose of Disbursement		011	L			500	.00		
Candidate Name NON-FEDERAL CONTRIBUTION	1	Category/ Type							
Office Sought: House Senate President	Disbursement For: 2011 Primary X General Other (specify) ▼	<u>,</u>							
State: NJ District:									
SUBTOTAL of Disbursements This Page	(optional)	····· ►				4250	.00		
TOTAL This Period (last page this line nu	mber only)				• •				

	SCHEDULE B (FEC Form 3 TEMIZED DISBURSEMENT	You want the second	rate schedule(s) category of the	(Check only	rone)
_			Summary Page	21b 27	22         23         24         25         26           28a         28b         28c         X         29         30b
	Any Information copied from such Reports a or for commercial purposes, other than using				
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL AC	TION COMMI	TTEE (a.k.a. N	ledco Health PAC)
A.	Full Name (Last, First, Middle Initial) WEBBER FOR ASSEMBLY				Transaction ID: EXPB100736 Date of Disbursement
	Mailing Address PO BOX 404				06 <sup>M</sup> /28/2011 <sup>Y</sup>
	City MORRIS PLAINS	State NJ	Zip Code 07954		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type	
	Office Sought: House Senate President State: NJ District:	Disbursement For: Primary Other (spe	2011 X General cify) ▼		
в.	Full Name (Last, First, Middle Initial) WHELAN FOR SENATE				Transaction ID: EXPB100755 Date of Disbursement
	Mailing Address P.O. BOX 362				$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} & \begin{array}{c} \prime \\ \end{array} & \begin{array}{c} D & D \\ 2 & 8 \end{array} & \begin{array}{c} \prime \\ \end{array} & \begin{array}{c} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{array} \end{array}$
	City NORTHFIELD	State NJ	Zip Code 08225		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type	
	Office Sought: House Senate President	Disbursement For: Primary Other (spe	2011 X General cify) ▼		
	State: NJ District:		27 <b>v</b>		

	SUBTOTAL of Disbursements This Page (optional)	•	1000.00
	TOTAL This Period (last page this line number only)	►	43250.00
Ì	FE6AN026		FEC Schedule B ( Form 3X) (Revised 02/2003)

SCHEDULE D (FEC Form 3X)		(Use separate	PAGE 433 / 434						
DEBTS AND OBLIGATIONS	schedule(s)								
Excluding Loans	for each numbered line)	(check only one) 9 X 10							
NAME OF COMMITTEE (In Full)									
MEDGO HEALTH SOLUTIONS INC. POLITICA	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)								
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP								
Mailing Address 1415 L STREET, STE. 1200	Mailing Address 1415 L STREET, STE. 1200								
City State SACRAMENTO CA	ZIP Code 95814								
Outstanding Balance Beginning This Period		Tra	nsaction ID: PAYD98672						
351.50									
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period						
0.00	351.50		0.00						
B. Full Name (Last, First, Middle Initial) of Debtor o NIELSEN MERKSAMER PARRINELLO GRO		Nature of D	ebt (Purpose):						
Mailing Address 1415 L STREET, STE. 1200									
City State	ZIP Code								
SACRAMENTO CA	95814								
Outstanding Balance Beginning This Period		Tra	nsaction ID: PAYD102093						
0.00									
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period						
1300.25	0.00		1300.25						
1) SUBTOTALS This Period This Page (optional)			1300.25						
2) TOTALS This Period (last page this line number on	2) TOTALS This Period (last page this line number only)								
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)									
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)									

A. Form/Schedule : SD10 Transaction ID : **PAYD98672**