04/18/2009 13:01

Image# 29933569532

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIM 3X	For C	Other Than An A	uthorized Com	nmittee	Offic	e Use Only
NAME OF COMMITTEE (in fu		FEC MAILING LABEI YPE OR PRINT ₩	Example:If over the line	typing, type es		
		C. POLITICAL ACTIC	ON COMMITTEE (a		PAC)	
	1 1 1 1 1			1 1 1 1 1	1 1 1 1 1 1	
ADDRESS (number and	street) 235	50 KERNER BLVD., S	SUITE 250			
Check if differ than previously reported. (ACC	/ LSA	N RAFAEL			CA L	94901
2. FEC IDENTIFICAT	ION NUMBER	₩	CITY A		STATEA	ZIPCODE 🛕
C00384362		3.	IS THIS REPORT	NEW (N) OR	AMEND (A)	ED
July 15 Quarterly October 1 Quarterly January 3 Quarterly July 31 M Report(N Year Only	Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) lid-Year on-election	(c) 12-Day PRE-Election Report for the: Election Report for the:	ction on Genera	May 20 (M5) Jun 20 (M6) Jul 20 (M7) y (12P) ntion (12C)	Aug 20 (M Sep 20 (M Oct 20 (M General (12G) Special (12G)	9) Year Only) Dec 20 (M12 (Non-Election Year Only)
5. Covering Period	03	01 2009	thro	ough 03	31 20	0 9
I certify that I have exam Type or Print Name of T	reasurer <u>Ja</u>	ason D. Kaune	knowledge and beli	ef it is true, correct	and complete.	
Signature of Treasurer	Electronically l	Filed by Jason D. K	aune	[Date 0.4	17 2009
NOTE : Submission of f	alse, erroneous,	or incomplete informa	tion may subject the	e person signing thi	is Report to the penal	ties of 2 U.S.C 437g.
Office Use					FI	EC FORM 3X (Rev. 12/2004)

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISRURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003)

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) D D 03 0 1 2009 0.3 3 1 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009 445690.14 January 1 (b) Cash on Hand at 461454.71 Begining of Reporting Period 44977.69 157774.20 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 506432.40 603464.34 6(a) and 6(c) for Column B) 74118.82 171150.76 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 432313.58 432313.58 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 1202.00 Schedule C and/or Schedule D) 2008 0 4 CA This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

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

Write or Type Committee Name

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

0 1 М М М М 3^D1 2009 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 91088.52 33213.48 (i) Itemized (use Schedule A) 11747.63 65638.28 (ii) Unitemized (iii) TOTAL (add 44961.11 156726.80 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 44961.11 156726.80 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 1000.00 Political Committees 17. Other Federal Receipts 16.58 47.40 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (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)). 19. Total Receipts (add Lines 11(d), 44977.69 157774.20 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 44977.69 157774.20 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	818.82	2150.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	818.82	2150.76
. Transfers to Affiliated/Other Party		
Committees Contributions to	0.00	0.00
Federal Candidates/Committeesand Other Political CommitteesIndependent Expenditure	29000.00	125500.00
(use Schedule E)	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
. Loan Repayments Made	0.00	0.00
. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
. Other Disbursements	44300.00	43500.00
Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	0.00
With Federal Funds (c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,	74118.82	171150.76
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	74110.02	171130.70
Total Federal Disbursements		
. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	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)	44961.11	156726.80
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	44961.11	156726.80
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	818.82	2150.76
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	818.82	2150.76

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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 6 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 6527 SHORBURGH [DRIVE		Date of Receipt
		J1 (1 V L		03 07 2009
	City	State	Zip Code	Transaction ID: INC.A.61116
	INDIANAPOLIS FEC ID number of contributing	IN	46278	Amount of Each Receipt this Period 25.00
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	on ARM PRACTICE	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00	
В.	Full Name (Last, First, Middle Initial) MR JASON COLE			Date of Receipt
	Mailing Address 14917 E BELLA VIST	A		03 / 07 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61294
	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	Occupation VP/GM	on	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00	
C.	Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
	Mailing Address 2903 CHUKKAR COL	JRT		03 07 2009
	City PLANT CITY	State FL	Zip Code 33567	Transaction ID: INC.A.61360 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33307	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional) .	1		75.00
	TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A	(FEC Form 3X) CEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial put	poses, other than using the name a ITTTEE (In Full)	nts may not be sold or used by any perso and address of any political committee to CAL ACTION COMMITTEE (a.k.a	n for the purpose of soliciting contributions solicit contributions from such committee. . Medco Health PAC)
A. MR JOSEPH FREI	9 GREEN HILL TRAIL St 3 T. f contributing mmittee. Coccurrence Cocc	ate Zip Code X 76262 Supation NATIONAL SERVICE CENTER	Date of Receipt M M M / D D / Y Y Y Y Y O 7 2 0 0 9 Transaction ID: INC.A.61364 Amount of Each Receipt this Period 50.00
Receipt For: Primary Other (spec	General	gregate Year-to-Date ▼ 650.00	
B. MR RICHARD JON	12224 MONTCALM STREET St IN f contributing mmittee. C SOLUTIONS Occ VP Age General	ate Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: INC.A.61419 Amount of Each Receipt this Period 25.00
Full Name (Last, I MR ROSS LUCE Mailing Address City GIBSONIA FEC ID number of federal political confederal political confederation of the political c	f contributing mmittee. C SOLUTIONS Occ VP Age	ate Zip Code A 15044 Eupation /GM gregate Year-to-Date 390.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Transaction ID: INC.A.61222 Amount of Each Receipt this Period 30.00
	eipts This Page (optional)(last page this line number only)	<u>·</u>	105.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 8 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	he name and address of	f any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS CATHY PATTEN Mailing Address 2001 MEADOWS A' City LANTANA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zi	p Code 6226 b-Date ▼	Date of Receipt M M C D D C 2009 Transaction ID: INC.A.61347 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS Mailing Address 2780 FOLKSTONE City COLUMBUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zi	p Code 3220 o-Date ▼	Date of Receipt M M O O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL City KELLER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		p Code 6248 0-Date ▼ 325.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional			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 9 / 186 (check only one) X
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
). A.	Full Name (Last, First, Middle Initial) MRS MONICA REED	OLITIO/IL/	torrow committee (a.m.a	Date of Receipt
~.	Mailing Address 8475 DUNHAM STATIO	ON DRIVE		03 07 2009
	City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.61311 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 PHA	n RM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
В.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CREEK	AVE		Date of Receipt
	City	State	Zip Code	0 3 0 7 2 0 0 9 Transaction ID: INC.A.61332
	<u>LAS VEGAS</u>	NV	89148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 780.00	
с. С.	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE			Date of Receipt
	Mailing Address 6108 HUNTER LANE			03 / 07 / 2009
	City COLLEYVILLE	State TX	Zip Code 76034	Transaction ID: INC.A.61356 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)			110.00
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 186 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt
Mailing Address 8362 GOLDEN PF	RAIRIE DRIVE		03 07 2009
City	State	Zip Code	Transaction ID: INC.A.61241
TAMPA FEC ID number of contributing federal political committee.	FL C	33647	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM)	
Receipt For: Primary General Other (specify) ▼	- + -	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Date of Receipt
Mailing Address 5 APPLE ORCHAR	RD RD		03 7 7 2009
City MOORESTOWN	State NJ	Zip Code 08057	Transaction ID: INC.A.61343 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00007	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI			Date of Receipt
Mailing Address 6691 DEERVIEW	DRIVE		03 07 2009
City LOVELAND	State OH	Zip Code 45140	Transaction ID: INC.A.61274
FEC ID number of contributing federal political committee.	C	43140	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	١	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (option			125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 186 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS LESLIE ACHTER			Date of Receipt
Mailing Address 821 ALBEMARLE STR	EET		03 14 2009
City	State	Zip Code	Transaction ID: INC.A.61221
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 EXEC DI	n IR ANALYTICAL SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK			Date of Receipt
Mailing Address 1021 SUNSET RIDGE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.61140
BRIDGEWATER	NJ	08807	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 PHAI	n RM CONTRACT & CONSUL	TING
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR STEPHEN ADLER			Date of Receipt
Mailing Address 139 BELLVALE LAKES	S RD		03 14 2009
City	State	Zip Code	Transaction ID: INC.A.61220
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	Occupatio VP INFC	n) TECHNOLOGY	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)			150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 186 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DR JODY ALLEN Mailing Address 3031 MOUNT HILL City	DR State	Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
MIDLOTHIAN FEC ID number of contributing federal political committee.	VA C	23113	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		n ICAL POLICY-GOV AFFAIR Year-to-Date ▼ 350.00	s]
Full Name (Last, First, Middle Initial) MARENE ALLISON Mailing Address 4405 WISMER ROA	AD		Date of Receipt 0 3 1 4 2 0 0 9
City DOYLESTOWN FEC ID number of contributing federal political committee.	State PA	Zip Code 18901	Transaction ID: INC.A.61532 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	- 	DIRITY & ASSET PROTECTI Year-to-Date ▼ 350.00	ON]
Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO Mailing Address 19 ROSS ROAD	l		Date of Receipt
City SCARSDALE FEC ID number of contributing federal political committee.	State NY	Zip Code 10583	Transaction ID: INC.A.61282 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	- ' '	TECHNOLOGY Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional))		150.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 186 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	the name and add	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) TEJWANSH ANAND Mailing Address 10 WHIPPOORWILI City CHAPPAQUA FEC ID number of contributing federal political committee. Name of Employer	L LAKE ROAD State NY C	Zip Code 10514	Date of Receipt 0 3 1 4 2 0 0 9 Transaction ID: INC.A.61499 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	VP INFO	TECHNOLOGY Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) DENNIS AUCH Mailing Address 5788 S. WALDEN G	LEN DRIVE		Date of Receipt 0 3 1 4 2 0 0 9
City	State	Zip Code	Transaction ID: INC.A.61600
MURRAY FEC ID number of contributing federal political committee.	C Occupation	84123	Amount of Each Receipt this Period 50.00
Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼	VP OPS	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) ERIK BAGIN			Date of Receipt
Mailing Address 73 HIGHLAND AVE	NUE		03 14 2009
City GLEN RIDGE	State NJ	Zip Code 07028	Transaction ID: INC.A.61535
FEC ID number of contributing federal political committee.	C	07028	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	_ MGR GROUP	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	1		150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 186 (check only one) X 11a
(Any information copied from such Reports and sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
)	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS BECKIE BARATKO	TDEET		Date of Receipt
	Mailing Address 80 N. WOODLAND S	IKEEI		03 / 14 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61434
	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 PRO	n POSAL UNIT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
– В.	Full Name (Last, First, Middle Initial) MR THOMAS BARATTA			Date of Receipt
	Mailing Address 69 SKYLINE DR			03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61369
	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		TECHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		350.00	
c. –	Full Name (Last, First, Middle Initial) JANE BARLOW			Date of Receipt
	Mailing Address 3 AVALON COURT			03 14 2009
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.61563 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12500	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MED	n ICAL POLICIES	7
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .	1		150.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Beports and	for each category of the Detailed Summary Page Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 15 / 186 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL BARONE Mailing Address 452 MEDWAY ROAE)	Date of Receipt
City	State 7:p Code	03 14 2009
City HIGHLAND HEIGHTS	State Zip Code OH 44143	Transaction ID: INC.A.61578 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 & GENERAL MGR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1353.86	
Full Name (Last, First, Middle Initial) MR DAVID BAUGH		Date of Receipt
Mailing Address 1813 ADONIS AVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.61487
HENDERSON	NV 89074	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MGR BENEFIT DELIVERY SYSTEMS	5
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR PETER BEGANS		Date of Receipt
Mailing Address 1605 CHARNITA CT		03 14 2009
City	State Zip Code	Transaction ID: INC.A.61337
VIENNA	VA 22182	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 GOVERNMENT AFFAIRS	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
SUBTOTAL of Receipts This Page (optional)		342.31

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 186 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to committee to committee. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN BELL Mailing Address 24 GLENWOOD RO City UPPER SADDLE RIVER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07458 C Occupation VP FINANCE Aggregate Year-to-Date 350.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Tell Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN Mailing Address 4520 LINWOOD LA City DEEPHAVEN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS		Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MR MARK BLAKE Mailing Address 129 NORWOOD AV City	State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
MONTCLAIR FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	Occupation VP BUSINESS DEV Aggregate Year-to-Date 350.00	Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional)	150.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 186 (check only one) X 11a
4	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN			Date of Receipt
	Mailing Address 50 NEW ENGLAND [03 14 2009
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.61328 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKT	on ING & PRODUCT DEV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
— В.	Full Name (Last, First, Middle Initial) KEN BODMER	1		Date of Receipt
	Mailing Address P.O. BOX 381947			03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61404
	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	Occupation SVP FIN		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1344.00	
_ C.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX			Date of Receipt
.	Mailing Address 6527 SHORBURGH I	DRIVE		0 3 1 4 2 0 0 9
	City INDIANAPOLIS	State IN	Zip Code 46278	Transaction ID: INC.A.61117 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40270	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	on ARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)			267.00
F	TOTAL This Period (last page this line numbe		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN			Date of Receipt
	Mailing Address 5259 FISHERCREST	LN		03 14 2009
	City RICHMOND	State VA	Zip Code 23231	Transaction ID: INC.A.61441 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FORM	n MULARY CONSULTING	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1400.00	
- В.	Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN Mailing Address 15 DAWN LANE	1		Date of Receipt
				03 14 2009
	City RINGWOOD	State NJ	Zip Code 07456	Transaction ID: INC.A.61483 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0,100	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	R STRAT PRODUCT MGM	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
- С.	Full Name (Last, First, Middle Initial) MS PATRICIA BRANUM			Date of Receipt
-	Mailing Address 210 FROG HOLLOW	ROAD		03 14 2009
	City COATESVILLE	State PA	Zip Code 19320	Transaction ID: INC.A.61428 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	19320	75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	& PROCESS ENGINEERIN	 IG
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional)	1		325.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 186 (check only one) X
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso g the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS IN Full Name (Last, First, Middle Initial)	C. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
MR JOHN BRENNAN Mailing Address 2 CARMEN LANE		Date of Receipt 0 3 1 4 2 0 0 9
City FLEMINGTON	State Zip Code NJ 08822	Transaction ID: INC.A.61525
FEC ID number of contributing federal political committee.	NJ 08822	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP AUDIT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR KENNETH BROWN		Date of Receipt
Mailing Address 540 GIORDANO D		03 14 2009
City YORKTOWN HEIGHTS	State Zip Code NY 10598	Transaction ID: INC.A.61186 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 ENTERPRISE BUS INTELLIGENCE	─ C€
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) AMANDA BUNDY	l	Date of Receipt
Mailing Address 5812 SEVEN POIN	ITS TRACE	03 14 2009
City HERMITAGE	State Zip Code TN 37076	Transaction ID: INC.A.61595 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIMBURSEMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	al)	150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 186 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and address	s of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR KEVIN BURON		<u> </u>	Date of Receipt
Mailing Address 25 TIMBERLAND			03 14 2009
City	State	Zip Code	Transaction ID: INC.A.61309
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 GENERAL N	MGR GROUP	
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MRS DOREEN CALDER			Date of Receipt
Mailing Address 441 S ELM STREET			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.61114
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 BUSINE	ESS REQUIREMENTS	
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI			Date of Receipt
Mailing Address 119 WASHINGTON AV	VENUE		03 14 2009
City	State	Zip Code	Transaction ID: INC.A.61388
CHATHAM	NJ	07928	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 & CON	TROLLER	
Receipt For: Primary General Other (specify) ▼	Aggregate Yea		
SUBTOTAL of Receipts This Page (optional)			282.31

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persithe name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR RAYMOND CARLUCCI Mailing Address 24 SHERI DRIVE	. POLITICAL ACTION COMMITTEE (a.k.a	Date of Receipt
City ALLENDALE FEC ID number of contributing	State Zip Code NJ 07401	Transaction ID: INC.A.61399 Amount of Each Receipt this Period 52.50
Receipt For: Primary Other (specify)	Occupation GROUP VP MARKET STRATEGY & Aggregate Year-to-Date ▼ 367.50	
Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VIS	TA	Date of Receipt 0 3 1 4 2 0 0 9
City VERADALE FEC ID number of contributing federal political committee.	State Zip Code WA 99037	Transaction ID: INC.A.61295 Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) JEFFREY COOLE Mailing Address 155 ASTON HALL D	DRIVE	Date of Receipt
City EADS	State Zip Code TN 38028	Transaction ID: INC.A.61593 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP Receipt For:	Occupation VP TAX AND REGULATORY REPO Aggregate Year-to-Date ▼	RT
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)	127.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 186 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and addr	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ANTONIO CORREIA Mailing Address 19 WILLIAMS LAN	E		Date of Receipt 0 3 1 4 2 0 0 9
City CHAPPAQUA FEC ID number of contributing	State NY	Zip Code 10514	Transaction ID: INC.A.61553 Amount of Each Receipt this Period 50.00
Receipt For: Primary Other (specify) ▼	Occupation VP BUSIN		
Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN Mailing Address 25 FAIRWAY TRAI	L		Date of Receipt 0 3 1 4 2 0 0 9
City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.61283 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation		192.31
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	SVP PHAI	RMACY NETWORK MGMT Year-to-Date ▼ 1346.17	<u>r </u>
Full Name (Last, First, Middle Initial) MR HART COVEN Mailing Address 28 OAK LANE			Date of Receipt
City	State	Zip Code	03 14 2009 Transaction ID: INC.A.61377
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	· ·	TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	(lı		292.31

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
_	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۵.	Full Name (Last, First, Middle Initial) MR ROBERT CRAIG Mailing Address 7979 E SANTA CATAL	INIA DD		Date of Receipt
	- Talling Address 7979 E SANTA CATAL	IIVA DIT		03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61268
	SCOTTSDALE	AZ	85255	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR PRODUCT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		420.00	
- 3.	Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
	Mailing Address 2903 CHUKKAR COUF	RT		03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61361
	PLANT CITY	FL	33567	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	e Year-to-Date ▼ 325.00	
-).	Full Name (Last, First, Middle Initial) MS MARY DASCHNER			Date of Receipt
	Mailing Address 2926 EWING AVE S			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.61252
	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		PRES RETIREE SOLUTION	IS
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10	
	SUBTOTAL of Receipts This Page (optional)			277.30
f	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 24 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ANDREW DAVIS			Date of Receipt
	Mailing Address 5616 BROOK DRIVE			03 14 4 2009
	City EDINA	State MN	Zip Code	Transaction ID: INC.A.61265
	FEC ID number of contributing federal political committee.	C	55439	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MED	on ICARE CLIENT & SALES SU	JP
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- В.	Full Name (Last, First, Middle Initial) MR DANIEL DAVISON	.		Date of Receipt
	Mailing Address 402 HIGHLAND AVE			03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61400
	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 SVP FIN	n IANCIAL PLANNING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
С. С.	Full Name (Last, First, Middle Initial) MICHEL DUFRESNE			Date of Receipt
	Mailing Address 58 INDEPENDENCE \	WAY		03 14 2009
	City MORRIS TWP	State NJ	Zip Code 07960	Transaction ID: INC.A.61505 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.000	192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENTI	on ERPRISE BUS INTELLIGEN	─ C€
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10	
	SUBTOTAL of Receipts This Page (optional)			292.30
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Si	fo D	se separate schedule(s) r each category of the etailed Summary Page be sold or used by any perso	FOR LINE NUMBER: PAGE 25 / 186 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and address	of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY Mailing Address 14026 KNOX STREET			Date of Receipt
City		Zip Code	0 3 1 4 2 0 0 9 Transaction ID: INC.A.61224
OVERLAND PARK FEC ID number of contributing federal political committee.	C	66221	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP SALES SI Aggregate Year	EGMENT LEADER r-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) DR SUMIT DUTTA Mailing Address 534 HUDSON STREET	Т		Date of Receipt
#3C City NEW YORK		Zip Code 10014	Transaction ID: INC.A.61318 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation		77.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	SVP & GENE Aggregate Year		
Full Name (Last, First, Middle Initial) C. MR MICHAEL EDWARDS			Date of Receipt
Mailing Address 109 KAREN PLACE			03 / 14 / 2009
City WYCKOFF		Zip Code 07481	Transaction ID: INC.A.61185 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		·····	177.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 26 / 186 (check only one)
TEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD			Date of Receipt
Mailing Address 128 SUMMIT AVENU	JE		03 14 2009
City	State	Zip Code	Transaction ID: INC.A.61527
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	Occupatio MEDICA	n RE CHIEF MEDICAL OFFIC	 CER
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	350.00	
Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN			Date of Receipt
Mailing Address 359 LONG HILL ROA	AD EAST		03 14 2009
City	State	Zip Code	Transaction ID: INC.A.61529
BRIARCLIFF MANOR	NY	10510	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP COR	n P COMMUNICATIONS	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN			Date of Receipt
Mailing Address 75 TWEED BLVD			03 / 14 / 2009
City	State	Zip Code	Transaction ID: INC.A.61106
UPPER GRANDVIEW	NY	10960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio CMO SV	n P MEDICAL&ANLYTC AFFI	RS
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		1346.17]
			292.31

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI Mailing Address 15804 SORAWATE	R DR.	Date of Receipt
City LITHIA FEC ID number of contributing	State Zip Code FL 33547	Transaction ID: INC.A.61206 Amount of Each Receipt this Period
Receipt For: Primary General	Occupation NATL ACCT EXEC Aggregate Year-to-Date ▼	35.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) RICHARD FARIS Mailing Address 2020 HEATHER CO		Date of Receipt 0 3
City MEMPHIS FEC ID number of contributing federal political committee.	State Zip Code TN 38119	Transaction ID: INC.A.61613 Amount of Each Receipt this Period 50.00
Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	Occupation VP HEALTH OUTCOME SOLUTION Aggregate Year-to-Date ▼ 350.00	NS .
Full Name (Last, First, Middle Initial) SUSAN FAUST Mailing Address 6614 HERONSWOO	OD COVE	Date of Receipt
City MEMPHIS	State Zip Code TN 38119	Transaction ID: INC.A.61589 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLIENT SLS AND MCD CARE	50.00
Receipt For: Primary General Other (specify) ▼	VP CLIENT SLS AND MGD CARE Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	135.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports a	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 186 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of any political committee to some committee to some committee to some committee (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DR RICHARD FEIFER Mailing Address 32 EILEEN DR		Date of Receipt
	7:01	03 14 2009
City MAHWAH	State Zip Code NJ 07430	Transaction ID: INC.A.61256 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 CARE ENHANCING SOLUTIONS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR THOMAS FEITEL		Date of Receipt
Mailing Address 58 APPLE HILL DI	3	03 14 2009
City	State Zip Code	Transaction ID: INC.A.61310
GILLETTE FEC ID number of contributing federal political committee.	NJ 07933	Amount of Each Receipt this Period 192.23
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP CORP MKTG & E-COMM	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1345.61	
Full Name (Last, First, Middle Initial) MR EDWARD FISCHER		Date of Receipt
Mailing Address 465 OLD STONE I	RD	03 14 2009
City	State Zip Code	Transaction ID: INC.A.61247
RIDGEWOOD	NJ 07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL PROD INTEGRATION	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	al)	292.23

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 186 (check only one) X 11a
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MEGHAN FITZGERALD			Date of Receipt
	Mailing Address 6 MORGAN AVE			03 / 14 / 2009
	City NORWALK	State CT	Zip Code 06851	Transaction ID: INC.A.61568 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 BUS	n SINESS DEVELOPMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
- В.	Full Name (Last, First, Middle Initial) KEVIN FRANCO			Date of Receipt
	Mailing Address 648 RIVERSIDE DR #222			03 / 14 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61415
	MEMPHIS FEC ID number of contributing federal political committee.	C	38103	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP FINA		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
- С.	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt
	Mailing Address 9 GREEN HILL TRAIL			03 14 2009
	City TROPHY CLUB	State TX	Zip Code 76262	Transaction ID: INC.A.61365 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	, 0202	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP NATI	n ONAL SERVICE CENTER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)			292.31
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 186 (check only one)
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any per ag the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL ACTION COMMITTEE (a.k	.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL Mailing Address 1404 NARDA CAN	IOETT DI VO	Date of Receipt
Mailing Address 1434 NARRAGAN		03 / 14 / 2009
City CRANSTON	State Zip Code RI 02905	Transaction ID: INC.A.61218 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 Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) FELIX FRUEH		Date of Receipt
Mailing Address 14401 FALLING L	EAF DRIVE	03 14 2009
City DARNESTOWN	State Zip Code MD 20878	Transaction ID: INC.A.61569 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 25070	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP RESEARCH & DEVELOPMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI		Date of Receipt
Mailing Address 24 MOREHOUSE	PL	03 14 2009
City NEW PROVIDENCE	State Zip Code NJ 07974	Transaction ID: INC.A.61102 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 ▼ 350.00	
SUBTOTAL of Receipts This Page (option	nal)	130.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	fe	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 186 (check only one) X
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address	s of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACT	ION COMMITTEE (a.k.a	a. Medco Health PAC)
۵.	Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI			Date of Receipt
	Mailing Address 720 N. LARRABEE APT 1701			03 / 14 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61482
	CHICAGO FEC ID number of contributing federal political committee.	C	60654	Amount of Each Receipt this Period 192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENI	ERAL MGR	
	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 1346.17	
 3.	Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO	1		Date of Receipt
	Mailing Address 69 LAKEVIEW DR			03 / 14 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61345
	OLD TAPPAN FEC ID number of contributing federal political committee.	NJ C	07675	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIENT	RELATIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 350.00	
. –	Full Name (Last, First, Middle Initial) MICHAEL GALVIN			Date of Receipt
	Mailing Address 25 BALLYMEADE RO	AD		03 14 2009
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.61510 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/CHIEF	INFRASTRUCTURE OF	FR
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 1346.17	
	SUBTOTAL of Receipts This Page (optional)	1		434.62

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 186 (check only one)
Any information copied from such Re or for commercial purposes, other that	oorts and Statements may n using the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTION	NS INC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initia MR PETER GAYLORD	al)		Date of Receipt
Mailing Address 1201 BRIDG	E STREET		03 14 2009
City ASBURY PARK	State NJ	Zip Code 07712	Transaction ID: INC.A.61101
FEC ID number of contributing federal political committee.	C	07712	Amount of Each Receipt this Period 60.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP TRE	n EASURY & FINANCIAL EVA	 LS
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initia	al)		Date of Receipt
Mailing Address 20 BROOKS	HIRE DR		03 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ROBBINSVILLE	State NJ	Zip Code 08691	Transaction ID: INC.A.61226
FEC ID number of contributing federal political committee.	C	00091	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n AL MGR GROUP	
Receipt For: Primary General Other (specify) ▼	 '	Year-to-Date ▼ 350.00]
Full Name (Last, First, Middle Initial MATTHEW GIBBS	al)		Date of Receipt
Mailing Address 27 N. WACK SUITE 246	ER DR.		03 14 2009
City CHICAGO	State IL	Zip Code	Transaction ID: INC.A.61560
FEC ID number of contributing federal political committee.	C	60606	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF C	1 LINICAL OFFICER	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 525.00	
SUBTOTAL of Receipts This Page	(ontional)		185.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 186 (check only one) X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MR THOMAS GILSON Mailing Address 2 PELL FARM ROAD			Date of Receipt
	City	State	Zip Code	0 3 1 4 2 0 0 9 Transaction ID: INC.A.61475
	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 ENERAL MGR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
	Full Name (Last, First, Middle Initial) MR SCOTT GILYARD			Date of Receipt
	Mailing Address 305 BERGAMOT DRI	VE		03 / 14 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61107
	MEDINA	MN	55340	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio PRES UI		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		1346.10	
	Full Name (Last, First, Middle Initial) MR JONAH GITLITZ			Date of Receipt
	Mailing Address 43 OVERLOOK RIDG	iE		03 / 14 / 2009
	City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.61172 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 _ ACCT EXEC	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 350.00	1
	Other (specify)	0 0		
	UBTOTAL of Receipts This Page (optional).			434.61

BUFFALO GROVE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS OC. VP	and address of any political committee to solution and address of any political committee to solution. ICAL ACTION COMMITTEE (a.k.a. State Zip Code L 60089	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES GRANT, JR Mailing Address 1928 BEVERLY LANE City S BUFFALO GROVE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MS GINA GRUHN	State Zip Code L 60089 cupation P FINANCIAL INSIGHTS Igregate Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BUFFALO GROVE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MS GINA GRUHN	cupation P FINANCIAL INSIGHTS Igregate Year-to-Date	Transaction ID: INC.A.61239 Amount of Each Receipt this Period
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) MS GINA GRUHN	cupation P FINANCIAL INSIGHTS gregate Year-to-Date	50.00
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MS GINA GRUHN	P FINANCIAL INSIGHTS gregate Year-to-Date ▼	_
MS GINA GRUHN		
Walling Address 13 WEATHER VAINE DITIVE	<u> </u>	Date of Receipt 0 3 1 4 2 0 0 9
City	State Zip Code	Transaction ID: INC.A.61302
CONVENT STATION FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 40.00
MEDCO HEALTH SOLUTIONS RE	cupation EGIONAL VP SALES-SYSTEMED]
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD Mailing Address 264 HARVEST AVE		Date of Receipt 0 3 1 4 2 0 0 9
•	State Zip Code	Transaction ID: INC.A.61167
STATEN ISLAND FEC ID number of contributing federal political committee.	NY 10310	Amount of Each Receipt this Period 50.00
MEDCO HEALTH SOLLITIONS	cupation P CONSUMER DRIVEN MKTS	-
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	>	140.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate so for each category Detailed Summa	y of the
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 politica	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee. TTEE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RICHARD GUIOR Mailing Address 50 BELLEVUE AV	Ξ	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SUMMIT FEC ID number of contributing	State Zip Code NJ 07901	Transaction ID: INC.A.61124 Amount of Each Receipt this Period 90.00
Receipt For: Primary Other (specify)	Occupation GROUP COO Aggregate Year-to-Date	630.00
Full Name (Last, First, Middle Initial) MS VALERIE HAERTEL Mailing Address 7 PARSLOE COU	RT	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MAHWAH FEC ID number of contributing	State Zip Code NJ 07430	Transaction ID: INC.A.61550 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary Other (specify)	Occupation VP INVESTOR RELATIO Aggregate Year-to-Date	
Full Name (Last, First, Middle Initial) MR MARK HALLORAN Mailing Address 19 KINGS RIDGE	ROAD	Date of Receipt
City LONG VALLEY FEC ID number of contributing federal political committee.	State Zip Code NJ 07853	Transaction ID: INC.A.61375 Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF INFO OFFICER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	1346.17
SUBTOTAL of Receipts This Page (option	al)	332.31

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee t	
` ′	C. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GREGORY HANSEN Mailing Address 1659 ISABELLA PA	DIZMAY	Date of Receipt
	State Zip Code	03 14 2009
City CHASKA	MN 55318	Transaction ID: INC.A.61481 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 Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR PETER HARTY		Date of Receipt
Mailing Address 19520 YELLOW WI	NG COURT	03 14 2009
City	State Zip Code	Transaction ID: INC.A.61104
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 GOVERNMENT AFFAIRS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1346.17	
Full Name (Last, First, Middle Initial) DAN HAYES		Date of Receipt
Mailing Address 4679 AYRON TERF	ACE	03 14 2009
City PALM HARBOR	State Zip Code FL 34685	Transaction ID: INC.A.61585 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
)	292.31

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	orts and Statements may not be sold or used by any person using the name and address of any political committee to	solicit contributions from such committee.
MEDCO HEALTH SOLUTION	IS INC. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initia MR SCOTT HELMUS	·	Date of Receipt
Mailing Address 23 VALLEY R	D	03 / 14 / 2009
City	State Zip Code	Transaction ID: INC.A.61168
SUCCASUNNA FEC ID number of contributing	NJ 07876	Amount of Each Receipt this Period 75.00
federal political committee.	C	73.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIENT SOLUTIONS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	525.00	
Full Name (Last, First, Middle Initia B. MR ERIC HESS))	Date of Receipt
Mailing Address 10 CARLTON	RD	03 14 2009
City	State Zip Code	Transaction ID: INC.A.61250
FLANDERS	NJ 07836	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 ENGINEERING & OPS	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	350.00	
Full Name (Last, First, Middle Initia SHERLYN HOBGOOD		Date of Receipt
Mailing Address 6635 LAMBE	RT DR	03 14 2009
City	State Zip Code	Transaction ID: INC.A.61597
MASON FEC ID number of contributing	TN 38049	Amount of Each Receipt this Period
federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation AVP NURSING SPEC PROGRAMS	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)	175.00
	e 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 38 / 186 (check only one) X
or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to expect the political committee (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON Mailing Address 1 HERITAGE RD City FLORHAM PARK FEC ID number of contributing	State Zip Code NJ 07932	Date of Receipt M M
Receipt For: Primary Other (specify) ▼	Occupation REGIONAL VP PHARMACIES Aggregate Year-to-Date 350.00	50.30
Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN Mailing Address 974 HILLCREST ROA City RIDGEWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07450 C Occupation VP FACILITIES Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR ROGER HOLLAND Mailing Address 41 SAINT RAPHAEL City LAGUNA NIGUEL FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code CA 92677 C Occupation VP SALES Aggregate Year-to-Date ▼ 350.00	Date of Receipt M M 2009 Transaction ID: INC.A.61341 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional) .	<u> </u>	150.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ELIZABETH HOLLOWAY			Date of Receipt
	Mailing Address 9222 RANDLE VALLE	Y DR		03 / 14 / 2009
	City CORDOVA	State TN	Zip Code 38018	Transaction ID: INC.A.61609 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation ASSIST/	on ANT GENERAL COUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 280.00	
_ 3.	Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE	1		Date of Receipt
				03 / 14 / 2009
	City ELMSFORD	State NY	Zip Code 10523	Transaction ID: INC.A.61372 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10020	80.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INTE	n RVENTION DELIVERY SYS	ST ST
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 560.00]
_).	Full Name (Last, First, Middle Initial) RITA HOLT	1		Date of Receipt
	Mailing Address 1558 N PISGAH ROA	D		03 14 2009
	City CORDOVA	State TN	Zip Code 38016	Transaction ID: INC.A.61592 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIM	on MBURSEMENT	7
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			170.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 186 (check only one) X 11a
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS CYNTHIA HORN			Date of Receipt
Mailing Address 9553 ANDREW DF	?		03 14 2009
City	State	Zip Code	Transaction ID: INC.A.61580
TWINSBURG FEC ID number of contributing federal political committee.	OH C	44087	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CUS		7
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR STEVEN HOROWITZ	 		Date of Receipt
Mailing Address 4 MELISSA COUR			03 / 14 / 2009
City MONTVILLE	State NJ	Zip Code 07045	Transaction ID: INC.A.61545 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS PLANNING	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR JEFFREY HULL			Date of Receipt
Mailing Address 2616 S 3B'S & K R	D		03 14 2009
City GALENA	State OH	Zip Code	Transaction ID: INC.A.61354
FEC ID number of contributing federal political committee.	C	43021	Amount of Each Receipt this Period 32.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n HLTH CARE OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 216.00	
SUBTOTAL of Receipts This Page (optional	al)		132.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persue name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS KIMBERLY HUMPHRIES Mailing Address 3726 ST PHILIP City BARTLETT FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State Zip Code TN 38133 C Occupation VP BUSINESS PLANNING Aggregate Year-to-Date 350.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR DAVID ISRAEL Mailing Address 730 COLUMBUS AV City NEW YORK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NY 10025 C Occupation VP BUSINESS DEV	Date of Receipt M M M
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MS SUSAN ITO Mailing Address 6366 SW 90TH STR	Aggregate Year-to-Date ▼ 350.00	Date of Receipt 0 3
City GAINESVILLE FEC ID number of contributing federal political committee.	State Zip Code FL 32608	Transaction ID: INC.A.61120 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date 350.00	
SUBTOTAL of Receipts This Page (optional)		150.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 186 (check only one) X
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any per githe name and address of any political committee IC. POLITICAL ACTION COMMITTEE (a.	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MARIANNE JACKS	(a.	Date of Receipt
Mailing Address 329 MORRIS AVE	NUE	0 3 1 4 2 0 0 9
City	State Zip Code	Transaction ID: INC.A.61149
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR WILLIAM JACKSON		Date of Receipt
Mailing Address 56 WARREN RD		03 / 14 / 2009
City	State Zip Code	Transaction ID: INC.A.61453
WEST ORANGE	NJ 07052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR MEDICARE OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	•
Full Name (Last, First, Middle Initial) MR JASON JAMES		Date of Receipt
Mailing Address RR 2 BOX 2036		03 14 2009
City	State Zip Code	Transaction ID: INC.A.61113
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 PHYSICIAN ENGAGEMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
SUBTOTAL of Receipts This Page (option	al)	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 43 / 186 (check only one) 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 NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any persename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR TODD JEFFREY Mailing Address 15 ELIZABETH STRE City DUMONT FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07628 C Occupation VP PHARM CONTRACT & CONSULA Aggregate Year-to-Date 350.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) ROBERT JINKS Mailing Address 22 PAGE AVE City LYNDHURST FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07071 C Occupation VP BUSINESS REQUIREMENTS Aggregate Year-to-Date	Date of Receipt M M M / D D D / Y Y Y Y Y O 3 1 4 2 0 0 9 Transaction ID: INC.A.61158 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MRS REGINA JONES Mailing Address POST OFFICE BOX 7 City LAS VEGAS FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP	State Zip Code NV 89136 C Occupation VP CUST SVC	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) .	Aggregate Year-to-Date ▼ 300.00	150.00

SCHEDULE A (FEC Forn ITEMIZED RECEIPTS	foi	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 44 / 186 (check only one) X
Any information copied from such Report or for commercial purposes, other than NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	using the name and address	of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee. . Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12224 MONTO	AI M STDEET		Date of Receipt
City CARMEL	State 2	Zip Code 46032	Transaction ID: INC.A.61420 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	+0032	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD Mailing Address 16357 VICTOF	RIA CURVE SE		Date of Receipt
City	State 2	Zip Code	0 3 1 4 2 0 0 9 Transaction ID: INC.A.61296
PRIOR LAKE		55372	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		35.00
Name of Employer MEDCO HEALTH SOLUTIONS		MKT PROG STRAT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 245.00	
Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE	-		Date of Receipt
Mailing Address 995 PINES TE	RR		03 14 2009
City		Zip Code	Transaction ID: INC.A.61202
FRANKLIN LAKES FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANC	IAL & ANALYTICAL SV	c
Receipt For: Primary General Other (specify) ▼	Aggregate Year	to-Date ▼	
SUBTOTAL of Receipts This Page (or	otional)		110.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than i	rts and Statements may not be sold or used by any persusing the name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	S INC. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III Mailing Address 1070 MOODL	ANDC DI	Date of Receipt
Mailing Address 1970 WOODLA	ANDS PL	03 / 14 / 2009
City	State Zip Code	Transaction ID: INC.A.61346
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 GENERAL MGR GROUP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) B. MS LISA KETNER	I	Date of Receipt
Mailing Address 7 POINT VIEW		03 14 2009
City	State Zip Code	Transaction ID: INC.A.61334
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 VP MEMBER STRATEGY	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER		Date of Receipt
Mailing Address 121 CONKLING	G TOWN ROAD	03 14 2009
City	State Zip Code	Transaction ID: INC.A.61455
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	Occupation SR DIR ACCT MGMT	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (or	otional)	150.00
	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 46 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) KENNETH KLEPPER			Date of Receipt
	Mailing Address 295 GLEN PLACE			03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61497
	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 OFFIC	ER
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10]
– В.	Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI			Date of Receipt
	Mailing Address 920 CLARK STREET			03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61173
	BOWLING GREEN	OH	43402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		L ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
с. С.	Full Name (Last, First, Middle Initial) MS BARBARA KRZAK			Date of Receipt
	Mailing Address 495 ISLAND WAY			03 14 2009
	City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.61381
	FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period 55.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP E-CC	on DM STRATEGY & DELIVER\	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 385.00	
	SUBTOTAL of Receipts This Page (optional)			297.30
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN Mailing Address 2735 YORK RD City COLUMBUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code OH 43221 C Occupation REGIONAL VP PHARMACIES Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR MARK LANDY Mailing Address 18 LADIK PL City MONTVALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07645 C Occupation VP SVC DELIVERY SYSTEM Aggregate Year-to-Date 525.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) JAMES LANGLEY Mailing Address 10921 MAIN RANG City LITTLETON FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼	0 0 0 0 0 0 0	Date of Receipt M M M / D D A 2009 Transaction ID: INC.A.61605 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional	J	175.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 186 (check only one) 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 NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and address of any political committee	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER Mailing Address 7017 COBALT WAY City CITRUS HEIGHTS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code CA 95621 C Occupation SR DIR GOVERNMENT AFFAIRS Aggregate Year-to-Date 1050.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) JOSEPH LENZ Mailing Address 74 IRON CREEK COU APT 101 City COLLIERVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Date of Receipt M M
Full Name (Last, First, Middle Initial) MR ROBERT LONG Mailing Address 18 HARLIND TERRAC City RAMSEY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	E State Zip Code NJ 07446 C Occupation SR NATL ACCT EXEC Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		250.00

	JLE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for comm	tion copied from such Reports and Sercial purposes, other than using the F COMMITTEE (In Full) HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MR ROSS		CT		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CIRCO	NII A	State PA	Zip Code	Transaction ID: INC.A.61223
	number of contributing blitical committee.	C	15044	Amount of Each Receipt this Period 30.00
	Employer HEALTH SOLUTIONS	Occupatio VP/GM		
	For: mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 390.00	
MR KENN	e (Last, First, Middle Initial) NETH MALLEY ddress 764 W. SADDLE RIVE	R ROAD		Date of Receipt
City		State	Zip Code	0 3 1 4 2 0 0 9 Transaction ID: INC.A.61251
HO HO	KUS	NJ	07423	Amount of Each Receipt this Period
	number of contributing plitical committee.	C		50.00
	Employer HEALTH SOLUTIONS		DUCT & CHANNEL MKTING	3
	mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
MR MICH	e (Last, First, Middle Initial) IAEL MANDAGLIO ddress 33 HICKORY TAVERN	I RD		Date of Receipt 0 3 1 4 2 0 0 9
City		State	Zip Code	Transaction ID: INC.A.61122
GILLET	TE	NJ	07933	Amount of Each Receipt this Period
federal po	number of contributing political committee.	C		50.00
Name of MEDCO Receipt F	Employer HEALTH SOLUTIONS	Occupatio VP FINA	NCE	
Pri	mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTA	L of Receipts This Page (optional)			130.00

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 186 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) LORI MARINO			Date of Receipt
Mailing Address 31 UNDERWOOD	DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WEST ORANGE	State NJ	Zip Code 07052	Transaction ID: INC.A.61559 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: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL			Date of Receipt
Mailing Address W144 N7150 TERI	RACE DRIVE		03 14 2009
City MENOMONEE FALLS	State WI	Zip Code 53051	Transaction ID: INC.A.61276 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	ACCT EXEC	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) THOMAS MARTIN			Date of Receipt
Mailing Address 1882 E LAUREL H	OLLOW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.61607 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00100	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation PRESIDE	n ENT - CCS	
Receipt For: Primary General Other (specify) ▼	 '	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (options	al)		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 51 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any period in the sold of used by an	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR TODD MARTIN Mailing Address 11825 SHEPPARDS City CLARKSVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y O 3 1 4 2 0 0 9 Transaction ID: INC.A.61233 Amount of Each Receipt this Period 192.30
Full Name (Last, First, Middle Initial) MR JEFFREY MAY Mailing Address 137 WASHINGTON A City HILLSDALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07642 C Occupation SVP DRUG DISTRIB & CONTROL Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE Mailing Address 11 JARDINE COURT City MORRIS PLAINS FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State Zip Code NJ 07950 C Occupation VP SALES AND MARKETING Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	,	434.60

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 186 (check only one) X
(Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) THOMAS MCCANN Mailing Address 9600 DOVE SPRING	0)/		Date of Receipt
	Mailing Address 9600 DOVE SPRING	CV		03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61614
	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 SALE		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		350.00	
- В.	Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH			Date of Receipt
	Mailing Address 87 ROSELAWN RD			03 / 14 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61335
	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	-, '	ENERAL COUNSEL	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		1344.00	
с. С.	Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA	'		Date of Receipt
	Mailing Address 112 GREEN TERRAC	CE WAY		03 / 14 / 2009
	City	State NJ	Zip Code	Transaction ID: INC.A.61462
	WEST MILFORD		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)		1346.17	
	SUBTOTAL of Receipts This Page (optional)			434.31
F	TOTAL This Period (last page this line numbe			

or fo	or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a. State Zip Code NJ 07869	solicit contributions from such committee.
A. [1]	MEDCO HEALTH SOLUTIONS INC. Full Name (Last, First, Middle Initial) DAVID MILLER Mailing Address 7 CLOVER LANE City RANDOLPH FEC ID number of contributing ederal political committee.	State Zip Code NJ 07869	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
A. <u>I</u>	DAVID MILLER Mailing Address 7 CLOVER LANE City RANDOLPH FEC ID number of contributing dederal political committee.	NJ 07869	Transaction ID: INC.A.61128 Amount of Each Receipt this Period
- (<u>I</u> f	City RANDOLPH FEC ID number of contributing federal political committee.	NJ 07869	Transaction ID: INC.A.61128 Amount of Each Receipt this Period
<u> </u> F f	RANDOLPH FEC ID number of contributing rederal political committee.	NJ 07869	Amount of Each Receipt this Period
f	ederal political committee.	C	
7	Name of Employer		
_		Occupation VP LABOR RELATIONS	
F	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
B. _!	Full Name (Last, First, Middle Initial) MRS KAREN MILLER		Date of Receipt
N	Mailing Address 34 MACKENZIE LAN	IE NORTH	03 14 2009
	Dity DENVILLE	State Zip Code	Transaction ID: INC.A.61121
F	FEC ID number of contributing ederal political committee.	NJ 07834	Amount of Each Receipt this Period 50.00
<u>1</u> 1	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR INTERNAL AUDIT	
F	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY		Date of Receipt
N	Mailing Address 86 WELLINGTON A	/ENUE	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City SHORT HILLS	State Zip Code NJ 07078	Transaction ID: INC.A.61110 Amount of Each Receipt this Period
F	FEC ID number of contributing rederal political committee.	C	192.00
<u>1</u> 1	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENL C-SEC-SVP PHARM STRAT S	
F	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1344.00	
su	BTOTAL of Receipts This Page (optional)		292.00

Any information of	copied from such Reports and Sta	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
or for commercia	ll purposes, other than using the r DMMITTEE (In Full)	ame and ad	ACTION COMMITTEE (a.k.a	solicit contributions from such committee.
MS THERESA	ast, First, Middle Initial) MORMILE SS 59 VALLEY VIEW TER			Date of Receipt
	55 VALLET VIEW TER			03 14 2009
City MONTVAL	=	State NJ	Zip Code 07645	Transaction ID: INC.A.61423
	per of contributing	C	07043	Amount of Each Receipt this Period 50.00
Name of Emp MEDCO HEA	oloyer ALTH SOLUTIONS	Occupatio VP FINA		
Receipt For: Primary Other (s	General	Aggregate	e Year-to-Date ▼ 350.00	
MR ROBERT	ast, First, Middle Initial) MULLER ess 69 FERN PLACE			Date of Receipt
City PARAMUS		State NJ	Zip Code 07652	Transaction ID: INC.A.61433 Amount of Each Receipt this Period
-	per of contributing al committee.	C		50.00
Name of Emp MEDCO HEA	oloyer ALTH SOLUTIONS	Occupatio VP HLTH	n H BUS CLIENT ENROLLMNT	
Receipt For: Primary Other (s	General	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (La	ast, First, Middle Initial) AGLE			Date of Receipt
Mailing Addre	ess 64 WALTER AVE			03 14 2009
City <u>HASBROU</u>	CK HEIGHTS	State NJ	Zip Code 07604	Transaction ID: INC.A.61171 Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing al committee.	C		50.00
Name of Emp MEDCO HEA	oloyer ALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS	
Receipt For: Primary Other (s	General	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of	Receipts This Page (optional)			150.00

TOTAL This Period (last page this line number only)

ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 186 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS ARLENE NELSON			Date of Receipt
Mailing Address 319 BOGERT AVE	NUE		03 14 2009
City RIDGEWOOD	State NJ	Zip Code	Transaction ID: INC.A.61208
FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN			Date of Receipt
Mailing Address 45 DAVIS ROAD			0 3 1 4 2 0 0 9
City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.61279
FEC ID number of contributing federal political committee.	C	07871	Amount of Each Receipt this Period 38.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL THERAPEUTICS	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 266.00	
Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER			Date of Receipt
Mailing Address 6 PARK DR SOUTH	1		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RYE	State NY	Zip Code	Transaction ID: INC.A.61445
FEC ID number of contributing federal political committee.	C	10580	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP		
Receipt For: Primary General Other (specify) ▼	'	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		138.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 186 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL I	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MELVIN OHL			Date of Receipt
Mailing Address 274 E FRANKLIN TPK	E		03 14 2009
City	State	Zip Code	Transaction ID: INC.A.61396
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	n CUREMENT & INVENTORY	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MRS SUE OLIVER			Date of Receipt
Mailing Address 11 LEE DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.61405
NORTH HALEDON	NJ	07508	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 TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS LUDIVINA PACAMARRA			Date of Receipt
Mailing Address 4 TEAK COURT			03 14 2009
City	State	Zip Code	Transaction ID: INC.A.61387
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 EXEC D	n IR TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)			150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Benorts:	Use separate schedule(s) for each category of the Detailed Summary Page and Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 57 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	ng the name and address of any political committee to a	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS DAWN PAGANO Mailing Address 185 PASCACK RO	OAD	Date of Receipt
		03 14 2009
City	State Zip Code NJ 07656	Transaction ID: INC.A.61386
PARK RIDGE FEC ID number of contributing federal political committee.	NJ 07656	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE		Date of Receipt
Mailing Address 12 MILLBROOK 0	COURT	03 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.61298
LIVINGSTON	NJ 07039	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP RETIREE SOLUTIONS MKTG	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	
Full Name (Last, First, Middle Initial) MRS CATHY PATTEN		Date of Receipt
Mailing Address 2001 MEADOWS	AVENUE	03 14 2009
City	State Zip Code	Transaction ID: INC.A.61348
LANTANA	TX 76226	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (option	nal)	130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 186 (check only one)
Any information copied from such Reports or for commercial purposes, other than us	and Statements may n	oot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	NC. POLITICAL AC	CTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS			Date of Receipt
Mailing Address 2780 FOLKSTON	IE ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COLUMBUS	State OH	Zip Code 43220	Transaction ID: INC.A.61182
FEC ID number of contributing federal political committee.	C	43220	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For: Primary General Other (specify) ▼	 	ear-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI			Date of Receipt
Mailing Address 211 WILTSIE CO	URT		03 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.61260 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0,10	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO T	ECHNOLOGY	
Receipt For: Primary General Other (specify) ▼		ear-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) MERRI PENDERGRASS, MD			Date of Receipt
Mailing Address 3201 QUEENSB	JRY WAY WEST		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COLLEYVILLE	State TX	Zip Code 76034	Transaction ID: INC.A.61575
FEC ID number of contributing federal political committee.	C	70034	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATIO	NAL PRACTICE LEADER	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	onal)		105.00
TOTAL This Period (last page this line no	umber only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly 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.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JIMMY PERREN			Date of Receipt
	Mailing Address 1250 BRAY PARK DF	REAST		03 / 14 / 2009
	City COLLIERVILLE	State TN	Zip Code 38017	Transaction ID: INC.A.61587 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		75.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP REG	on BULATORY COMPLIANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
В.	Full Name (Last, First, Middle Initial) MR THOMAS PETTYES Mailing Address 8522 UPLAND LN NC	DRTH		Date of Receipt
			Zip Code	03 14 2009
	City MAPLE GROVE	State MN	55311	Transaction ID: INC.A.61228 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	on AL MGR GROUP	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
C.	Full Name (Last, First, Middle Initial) MR THOMAS PIERCE			Date of Receipt
	Mailing Address 10297 E. LAKE DR.			03 14 2009
	City ENGLEWOOD	State CO	Zip Code 80111	Transaction ID: INC.A.61548 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00111	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LAB	OR RELATIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .	1		175.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FI	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 186 (check only one)
or for commercial purposes	, other than using the name and ac	ay not be sold or used by any persoddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTE	E (In Full) OLUTIONS INC. POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, M MS JUDITH PLATKIN	,		Date of Receipt
Mailing Address 29 B	LACKWELL AVE		03 14 2009
City	State	Zip Code	Transaction ID: INC.A.61123
MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
FEC ID number of contr federal political committee			192.30
Name of Employer MEDCO HEALTH SOL	UTIONS Occupation SVP & C	on GENERAL MGR	
Receipt For: Primary Other (specify)	Aggregat Aggregat	e Year-to-Date ▼ 1346.10	
Full Name (Last, First, MMR NEIL PREZIOSO	Middle Initial)		Date of Receipt
Mailing Address 1025	58 WINDSOR WAY	03 / 14 / 2009	
City	State	Zip Code	Transaction ID: INC.A.61355
POWELL	OH	43065	Amount of Each Receipt this Period
FEC ID number of contr federal political committe			50.00
Name of Employer MEDCO HEALTH SOL	UTIONS Occupation VP HLT	on H CARE OPS/FORMULARY/	CDP
Receipt For: Primary Other (specify)	General Aggregat	e Year-to-Date ▼ 350.00	
Full Name (Last, First, MS KARIN PRINCIVALLE			Date of Receipt
Mailing Address 875			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.61317
RAMSEY	NJ	07446	Amount of Each Receipt this Period
FEC ID number of contr federal political committee			192.30
Name of Employer MEDCO HEALTH SOL	1 2 AL LIN	l	
Receipt For:		e Year-to-Date ▼	
Primary Other (specify) ▼	General	1346.10]

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) MR MARK PROULX Mailing Address 20 BRANDY RIDGE RO City SPARTA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State NJ C Occupation SVP PHA	Zip Code 07871 on ARMACY & CUST SVC OPS	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Other (specify) Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL City KELLER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State TX C Occupation DIR HR	Zip Code 76248	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ C.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MS FRANCES RAO Mailing Address 19 ROSS ROAD City SCARSDALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State NY C Occupation EXEC D	IR REGULATORY	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		·	292.31

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MRS MONICA REED Mailing Address - 0.475 DUNI IAM STAT	TON DRIVE		Date of Receipt
	Mailing Address 8475 DUNHAM STAT	ION DRIVE		03 / 14 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61312
	TAMPA	<u>FL</u>	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 DIR PHA	n ARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00]
_ В.	Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS			Date of Receipt
	Mailing Address 43 HAROLD ST. UNIT B City State			03 / 14 / 2009
			Zip Code	Transaction ID: INC.A.61245
	COS COB FEC ID number of contributing federal political committee.	C	06807	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR RECONCILIATION	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
_ С.	Full Name (Last, First, Middle Initial) MR VICTOR RENNA			Date of Receipt
	Mailing Address 8 CARLA ANN CT			03 / 14 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61448
	FLANDERS FEC ID number of contributing federal political committee.	C	07836	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	n CUREMENT & INVENTORY	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			125.00
	TOTAL This Period (last page this line numbe		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \frac{1}{2}	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any 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.	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS			Date of Receipt
	Mailing Address 412 RIVER MEWS LA	ANE		03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61501
	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 EXEC D	n IR TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 490.00]
_ В.	Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO			Date of Receipt
	Mailing Address 96 LEHMANN STREE	T		03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61243
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS		ENT SYSTEMED	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10	
- С.	Full Name (Last, First, Middle Initial) MS DONNA ROSEN			Date of Receipt
	Mailing Address 7 RED OAK LANE			03 14 2009
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.61412
	FEC ID number of contributing federal political committee.	C	07403	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n -CLINICAL TECH	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			312.30
t	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 186 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS			Date of Receipt
Mailing Address 7227 RAMOTH DR	RIVE		03 14 2009
City JACKSONVILLE	State FL	Zip Code 32226	Transaction ID: INC.A.61213 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) ▼	 	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR RICHARD RUBINO			Date of Receipt
Mailing Address 3 APACHE DRIVE			03 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.61409 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	37.100	193.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINA	ANCE & CHIEF FIN OFFCR	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1351.00	
Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK			Date of Receipt
Mailing Address 21 SKY TOP RIDO	GE .		M M / D D / Y Y Y Y Y Y O O O O
City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.61262 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07450	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLIN	CAL MGMT & SVCS	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	al)		293.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 186 (check only one) X
Aı or	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	a. Medco Health PAC)		
A .	Full Name (Last, First, Middle Initial) MS KATHERYN RUSSI			Date of Receipt
	Mailing Address 5965 VILLAGE CIRCI	03 / 14 / 2009		
	City	State	Zip Code	Transaction ID: INC.A.61160
	JOHNSTON FEC ID number of contributing federal political committee.	C	50131	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR CLINICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
— 3.	Full Name (Last, First, Middle Initial) MR JESSE RUZICKA			Date of Receipt
	Mailing Address 334 MORRIS AVE	03 14 2009		
	City	State	Zip Code	Transaction ID: INC.A.61521
	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	Occupation NATL AC	on CCT EXEC	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 210.00	
—).	Full Name (Last, First, Middle Initial) MS MARY RYAN			Date of Receipt
	Mailing Address 456 RICHMOND AVE	NUE		03 14 2009
	City MAPLEWOOD	State NJ	Zip Code 07040	Transaction ID: INC.A.61402
	FEC ID number of contributing federal political committee.	C	07040	Amount of Each Receipt this Period 78.34
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHA	n RMACY REGULATORY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 548.38	
s	SUBTOTAL of Receipts This Page (optional) .			158.34
 	OTAL This Period (last page this line numbe	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 66 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	solicit contributions from such committee.		
2	Full Name (Last, First, Middle Initial)	POLITICAL A	ACTION COMMITTEE (a.k.a	. Wedco Health PAC)		
A.	MR DAVID SCHLETT Mailing Address 339 GRAMERCY PL			Date of Receipt		
	City	State	Zip Code	0 3 1 4 2 0 0 9 Transaction ID: INC.A.61408		
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN	n ANCIAL & ANALYTICAL SV	C		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00			
В.	Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ Mailing Address 9111 N KARLOV			Date of Receipt		
				03 14 2009		
	City SKOKIE	State IL	Zip Code 60076	Transaction ID: INC.A.61183 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	e Year-to-Date ▼ 350.00]		
с. С.	Full Name (Last, First, Middle Initial) BRUCE SCOTT			Date of Receipt		
	Mailing Address 18650 BEARPATH TR	-				
	City EDEN PRAIRIE	State MN	Zip Code 55347	Transaction ID: INC.A.61574 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	00047	192.31		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & C	n HIEF PHARMACIST			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.17			
	SUBTOTAL of Receipts This Page (optional) .			292.31		
İ	TOTAL This Period (last page this line numbe	r onlv)				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 186 (check only one) X 11a
7	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 perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MS CYNTHIA SCOTT	Date of Receipt		
	Mailing Address 18650 BEARPATH TF	03 / 14 / 2009		
	City EDEN PRAIRIE	State MN	Zip Code 55437	Transaction ID: INC.A.61126 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 CLIN	on IICAL PROG DEV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT			Date of Receipt
	Mailing Address 7330 EVEREST LANE	03 / 14 / 2009		
	City	State	Zip Code	Transaction ID: INC.A.61450
	MAPLE GROVE FEC ID number of contributing federal political committee.	C	55311	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	n L ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- С.	Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE	1		Date of Receipt
	Mailing Address 3021 E MILLCREEK F	ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City SALT LAKE CITY	State UT	Zip Code 84109	Transaction ID: INC.A.61118 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: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
f	TOTAL This Period (last page this line number	onlv)		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 186 (check only one) X
\ \	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV			Date of Receipt
	Mailing Address 66 PROSPECT AVE			03 14 2009
	City	State NJ	Zip Code	Transaction ID: INC.A.61473
	WESTWOOD FEC ID number of contributing federal political committee.	C	07675	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUS	on INESS DEV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CREEK	< AVE		Date of Receipt
	City	State	Zip Code	03 14 2009
	LAS VEGAS	NV	89148	Transaction ID: INC.A.61333 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/GM	on	
	Receipt For: Primary General Other (specify) ▼	-, '	e Year-to-Date ▼ 780.00	
_ C.	Full Name (Last, First, Middle Initial) MR JOHN SHEA			Date of Receipt
	Mailing Address 62 FRANKLIN TURN	PIKE		03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61135
	ALLENDALE FEC ID number of contributing federal political committee.	C	07401	Amount of Each Receipt this Period 40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST Co	on OUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 280.00	
	SUBTOTAL of Receipts This Page (optional)	1		150.00
	TOTAL This Period (last page this line numbe	er only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 186 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR FRANK SHEEHY Mailing Address 119 HAMILTON RD City RIDGEWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	, '	Zip Code 07450 on EENERAL MGR e Year-to-Date ▼	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR PETER SHERMAN Mailing Address 139 GATES AVENUE City MONTCLAIR FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupatio MANAGI	Zip Code 07042 on NG COUNSEL e Year-to-Date ▼	Date of Receipt M M M J D D J Z D O D D J Z D D D D D D D D D D D D D D D D
Full Name (Last, First, Middle Initial) JEFFREY SIMEK Mailing Address 704 SAW PALMETTO City PORT ORANGE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State FL C Occupatio VP COR	Zip Code 32128 n P COMMUNICATIONS e Year-to-Date ▼ 1346.17	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			292.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 186 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR LEE SIMON Mailing Address 2390 GREENVIEW	V ROAD		Date of Receipt 0 3
City NORTHBROOK FEC ID number of contributing	State IL	Zip Code 60062	Transaction ID: INC.A.61457 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) ▼	- 	n AL MGR GROUP • Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial) MR JEFFREY SINKO Mailing Address 10 CHERRY TREE	LANE		Date of Receipt 0 3 1 4 2 0 0 9
City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.61342 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS		ENERAL COUNSEL	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO			Date of Receipt
Mailing Address 564 DALE COURT	EAST		03 / 04 / 2009
City RIVER VALE	State NJ	Zip Code 07675	Transaction ID: INC.A.61151 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer MEDCO HEALTH SOLUTIONS		rechnology	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (options	al)		130.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	e name and add	dress of any political committee to	solicit contributions from such committee.
\angle	Full Name (Last, First, Middle Initial)	POLITICAL /	ACTION COMMITTEE (a.K.a	
Α.	MR ROBERT SMITH Mailing Address 40 JOSHUA DR T			Date of Receipt 0 3 1 4 2 0 0 9
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.61430 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	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 700.00	
— В.	Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR Mailing Address 23 CEDAR GATE RO.	AD		Date of Receipt
	City	State	Zip Code	0 3 1 4 2 0 0 9 Transaction ID: INC.A.61492
	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	n AN & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
 C.	Full Name (Last, First, Middle Initial) MR ALAN SOKALER			Date of Receipt
	Mailing Address 30 MICHELLE WAY			03 14 2009
	City PINE BROOK	State NJ	Zip Code 07058	Transaction ID: INC.A.61522 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: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
s	SUBTOTAL of Receipts This Page (optional)			292.31
	OTAL This Period (last page this line number		<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or f	r information copied from such Reports and Stor commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE	OLITIOAL 7	TOTION GOIVINITTEE (a.n.a	Date of Receipt
	Mailing Address 6108 HUNTER LANE			0 3 1 4 2 0 0 9
	COLLEXAGE	State TX	Zip Code	Transaction ID: INC.A.61357
	COLLEYVILLE FEC ID number of contributing federal political committee.	C	76034	Amount of Each Receipt this Period 25.00
•	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 325.00	
3.	Full Name (Last, First, Middle Initial) PETER STARK			Date of Receipt
	Mailing Address 4840 COLE ROAD			03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61608
•	MEMPHIS FEC ID number of contributing federal political committee.	C	38117	Amount of Each Receipt this Period 50.00
•	Name of Employer ACCREDO HEALTH GROUP	Occupatio GROUP	n VP MANUF SVCS	
•	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN Mailing Address 7 FOREST LAKE DR			Date of Receipt 0 3
	City	State	Zip Code	Transaction ID: INC.A.61410
	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	Occupatio SVP FIN	n ANCIAL & ANALYTICAL SV	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
SL	IBTOTAL of Receipts This Page (optional)			267.31
T,	OTAL This Period (last page this line number of	anly)		

nts may not be sold or used by any person and address of any political committee to sold address of any person and address of any person and address of any political committee to sold address of addre			
tate Zip Code X 78732 cupation NATL ACCT EXEC gregate Year-to-Date	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
X 78732 cupation NATL ACCT EXEC gregate Year-to-Date ▼	Transaction ID: INC.A.61460 Amount of Each Receipt this Period 50.00 Date of Receipt		
X 78732 cupation NATL ACCT EXEC gregate Year-to-Date ▼	Amount of Each Receipt this Period 50.00 Date of Receipt		
cupation I NATL ACCT EXEC gregate Year-to-Date ▼	Date of Receipt		
NATL ACCT EXEC gregate Year-to-Date ▼	M M / D D / Y Y Y Y		
	M M / D D / Y Y Y Y		
	M M / D D / Y Y Y Y		
Mailing Address 1740 HIGHLAND DRIVE			
tate Zip Code	Transaction ID: INC.A.61277		
53122	Amount of Each Receipt this Period		
	50.00		
cupation NATIONAL PRACTICE LEADER			
gregate Year-to-Date ▼ 350.00			
	Date of Receipt		
	0 3 1 4 2 0 0 9		
'	Transaction ID: INC.A.61478 Amount of Each Receipt this Period		
	192.31		
!	- NS		
	292.31		
	State Zip Code NJ 07458 Scupation /P/GM ADVANCED CLINICAL SLTN ggregate Year-to-Date		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 74 / 186 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	the name and address of	any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR GERARD STOCKER, JR Mailing Address 80 ALGONQUIN T	RL		Date of Receipt 0 3 1 4 2 0 0 9
City OAKLAND FEC ID number of contributing	NJ 074	Code 436	Transaction ID: INC.A.61235 Amount of Each Receipt this Period
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation SR NATL ACCT Aggregate Year-to-		50.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) MR SCOTT STRATTON Mailing Address 351 TIMBERLANE	DRIVE	330.00	Date of Receipt 0 3 1 4 2 0 0 9
City ORANGE FEC ID number of contributing federal political committee.	`	Code 477	Transaction ID: INC.A.61528 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP PRODUCT [Aggregate Year-to-	DEVELOPMENT Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS SUZANNE STREDNAK Mailing Address 157 WATCHUNG	DR .		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HAWTHORNE FEC ID number of contributing		Code 506	Transaction ID: INC.A.61189 Amount of Each Receipt this Period 50.00
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICA	AL SVCS	
Receipt For: Primary General Other (specify)	Aggregate Year-to-	Date ▼ 350.00	
SUBTOTAL of Receipts This Page (options	al)		150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any person name and address of any political committee to see POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MILAYNA SUBAR, MD Mailing Address 11 RIVERSIDE DRIVE #8CE City NEW YORK FEC ID number of contributing	State Zip Code NY 10023	Date of Receipt M M M
Receipt For: Primary Other (specify)	Occupation VP NATIONAL PRACTICE LEADER Aggregate Year-to-Date 210.00	
Full Name (Last, First, Middle Initial) MR MARK SULLIVAN Mailing Address 16025 PINE VALE PL. City MIDLOTHIAN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code VA 23113 C Occupation DIR CS SYSTEMS PLAN & IMPLEM Aggregate Year-to-Date 280.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS IRENE SUTTON Mailing Address 20 AVENUE @ PORT APT 209 City WEST NEW YORK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	IMPERIAL State Zip Code NJ 07093 C Occupation	Date of Receipt M M
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)	SR DIR TECHNOLOGY Aggregate Year-to-Date ▼ 280.00	110.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 11
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
/	. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT		Date of Receipt
Mailing Address 8362 GOLDEN PRA City	State Zip Code	03 14 2009
TAMPA	FL 33647	Transaction ID: INC.A.61242 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS MARY THORSBY		Date of Receipt
Mailing Address 17326 ELLEN DR		03 14 2009
City LIVONIA	State Zip Code MI 48152	Transaction ID: INC.A.61258
FEC ID number of contributing federal political committee.	C 40132	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For: Primary General	Aggregate Year-to-Date ▼ 525.00	1
Other (specify)		
Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN		Date of Receipt
Mailing Address 838 COLONIAL RD		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City FRANKLIN LAKES	State Zip Code NJ 07417	Transaction ID: INC.A.61143 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENEFIT SYSTEMS SUPPORT	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		175.00
TOTAL This Period (last page this line numb	er only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 186 (check only one) X 11a
7	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER	Date of Receipt		
	Mailing Address 713 INDIAN CREEK I			03 14 2009
	City AMHERST	State VA	Zip Code 24521	Transaction ID: INC.A.61339
	FEC ID number of contributing federal political committee.	C	24321	Amount of Each Receipt this Period 75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on GOVERNMENT AFFAIRS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
_ В.	Full Name (Last, First, Middle Initial) MR GARY TULLY			Date of Receipt
	Mailing Address 16 FIELDHEDGE DRIVE			03 14 2009
	City	State	Zip Code	Transaction ID: INC.A.61465
	HILLSBOROUGH FEC ID number of contributing federal political committee.	NJ C	08844	Amount of Each Receipt this Period 30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLII	on ENT SVC DELIVERY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
_ C.	Full Name (Last, First, Middle Initial) MR JEFFREY TYLER			Date of Receipt
	Mailing Address 37 KNOLL TERRACE			03 14 2009
	City HAZLET	State NJ	Zip Code 07730	Transaction ID: INC.A.61304 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0,7,00	30.77
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 215.39	
	SUBTOTAL of Receipts This Page (optional) .			135.77
	TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usi NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any peng the name and address of any political committee. NC. POLITICAL ACTION COMMITTEE (a.)	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS CARA VAN ZILE Mailing Address 31 LINCOLN RD City KINNELON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07405 C Occupation EXEC DIR ANALYTICAL SVCS Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA Mailing Address W328 S4230 SPF City WAUKESHA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code WI 53189 C Occupation SVP & GENERAL MGR Aggregate Year-to-Date 700.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS Mailing Address 105 ARRANDALE City ROCKVILLE CENTRE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 11570 C Occupation VP MKTING Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	nal)	200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any per e name and address of any political committee POLITICAL ACTION COMMITTEE (a.k	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR WIL VELARDE Mailing Address 443 WEST SADDLE City UPPER SADDLE RIVER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary Other (specify)	RIVER RD State Zip Code NJ 07458 C Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date 210.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR DANIEL WALDEN Mailing Address 450 BEECHMONT DI City NEW ROCHELLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 10804 C Occupation SVP REGULATORY & MC PROGE Aggregate Year-to-Date	Date of Receipt M M
Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE Mailing Address 5445 GOODWIN AVE City DALLAS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code TX 75206 C Occupation VP SALES SEGMENT LEADER Aggregate Year-to-Date 1346.17	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		414.62

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for c	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 solicit contributions from such committee.
1 \	ME OF COMMITTEE (In Full) EDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A. <u>MR</u>	Name (Last, First, Middle Initial) CALVIN WASDYKE	_		Date of Receipt
Mai ————————————————————————————————————	ling Address 5 APPLE ORCHARD F	RD State	Zip Code	0 3
-	OORESTOWN	NJ	08057	Amount of Each Receipt this Period
FEC	C ID number of contributing eral political committee.	С		50.00
Nar ME	ne of Employer DCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
B. MS	Name (Last, First, Middle Initial) CATHERINE WASSON			Date of Receipt
Mai	Mailing Address 3912 CALLE ANDALUCIA			03 14 2009
City	City State Zip Code			Transaction ID: INC.A.61146
<u>SA</u>	N CLEMENTE	CA	92673	Amount of Each Receipt this Period
	CID number of contributing eral political committee.	C		50.00
Nar ME	ne of Employer DCO HEALTH SOLUTIONS	Occupatio VP NATI	n _ ACCTS	
Red	ceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
	Name (Last, First, Middle Initial) S KELLY WEBBER			Date of Receipt
Mai 	ling Address 107 UPPER SADDLE I	RIVER ROA	AD	03 14 2009
City	, DNTVALE	State	Zip Code	Transaction ID: INC.A.61324
FEO	CID number of contributing eral political committee.	NJ C	07645	Amount of Each Receipt this Period 100.00
Nar ME	ne of Employer DCO HEALTH SOLUTIONS	Occupatio VP COR		
Rec	eipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	700.00	
SUBT	OTAL of Receipts This Page (optional)		\	200.00
	L 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 81 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17	
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	solicit contributions from such committee.	
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)	
Α.	Full Name (Last, First, Middle Initial) LOWELL WEINER Mailing Address 1 BURGESS COURT			Date of Receipt	
	City WESTFIELD	State NJ	Zip Code 07090	Transaction ID: INC.A.61555 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	07030	50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP COR	on RP COMMUNICATIONS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00		
В.	Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH Mailing Address 309 WATERVIEW DF			Date of Receipt	
				03 / 14 / 2009	
	City State FRANKLIN LAKES NJ		Zip Code 07417	Transaction ID: INC.A.61225 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	0/1/	192.31	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	on PRES EMPLOYER GROUP		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17		
C.	Full Name (Last, First, Middle Initial) MR KENNETH WERMES			Date of Receipt	
	Mailing Address 26037 N WRANGLEF	Mailing Address 26037 N WRANGLER RD			
	City	State	Zip Code	Transaction ID: INC.A.61314	
	SCOTTSDALE FEC ID number of contributing federal political committee.	C	85255	Amount of Each Receipt this Period 75.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00		
	SUBTOTAL of Receipts This Page (optional) .	1		317.31	
	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 82 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 11
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person the name and address of any political committee to see POLITICAL ACTION COMMITTEE (a.k.a.	
Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON Mailing Address 2 TIFFANY ROAD City MORRISTOWN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07960 C Occupation VP MKTING Aggregate Year-to-Date 350.00	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN Mailing Address 145 WAUGHAW RO City TOWACO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07082 C Occupation SVP FINANCIAL & ANALYTICAL SVC Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH Mailing Address 43 AZALEA PLACE City PISCATAWAY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 08854 C Occupation SR DIR RRA Aggregate Year-to-Date 210.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	130.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 186 (check only one) X
or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS ANNA WONG Mailing Address 64-20 BELL BLVD City BAYSIDE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 11364 C Occupation VP INSURED SOLUTIONS Aggregate Year-to-Date ▼ 350.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) BRENDA WRIGHT Mailing Address 1834 HUNTERS CRE City GERMANTOWN FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General	State Zip Code TN 38138 C Occupation VP QUALITY INTEGRITY HEALTH Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR Mailing Address 219 SPOOK ROCK F City SUFFERN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NY 10901 C Occupation VP E-COM DEV	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 350.00	150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
_	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma le name and ad	ly not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) ANDREA ZICCARELLI	Date of Receipt		
	Mailing Address 6550 HERONWOOD	03 / 14 / 2009		
	City MEMPHIS	State TN	Zip Code 38119	Transaction ID: INC.A.61214 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	on L ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI Mailing Address 6691 DEERVIEW DR	Date of Receipt		
	City State Zip Code			03 14 2009
	LOVELAND OH		45140	Transaction ID: INC.A.61275 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
- С.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX			Date of Receipt
	Mailing Address 6527 SHORBURGH DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City INDIANAPOLIS	State IN	Zip Code 46278	Transaction ID: INC.A.61638 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	102.0	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	on ARM PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)	1		100.00
	TOTAL This Period (last page this line number	er only)		

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 1		
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
Fı 1. <u>M</u>	ull Name (Last, First, Middle Initial) IR JASON COLE Iailing Address 14917 E BELLA VISTA		`	Date of Receipt 0 3 2 1 2 0 0 9		
<u>V</u>	ity ERADALE	State WA	Zip Code 99037	Transaction ID: INC.A.61815 Amount of Each Receipt this Period		
fe	EC ID number of contributing deral political committee.	C	2	25.00		
	ame of Employer IEDCO HEALTH SOLUTIONS eceipt For: Primary General Other (specify) ▼	Occupatio VP/GM Aggregate	e Year-to-Date ▼ 325.00			
. <u>M</u>	ull Name (Last, First, Middle Initial) IR KENNETH DANIELS lailing Address 2903 CHUKKAR COUF	ETH DANIELS				
	ity	State	Zip Code	0 3 2 1 2 0 0 9 Transaction ID: INC.A.61881		
FI	ELANT CITY EC ID number of contributing deral political committee.	C	33567	Amount of Each Receipt this Period 25.00		
N: M	ame of Employer IEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n			
R	eceipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 325.00			
M	ull Name (Last, First, Middle Initial) IR JOSEPH FRENDO lailing Address 9 GREEN HILL TRAIL			Date of Receipt		
C	ity	State	Zip Code	0 3 2 1 2 0 0 9 Transaction ID: INC.A.61885		
FI	ROPHY CLUB EC ID number of contributing deral political committee.	C	76262	Amount of Each Receipt this Period 50.00		
N: M	ame of Employer IEDCO HEALTH SOLUTIONS	Occupatio VP NATI	n ONAL SERVICE CENTER			
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00			
SUE	I BTOTAL of Receipts This Page (optional)			100.00		
	FAL 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 86 / 186 (check only one) X 11a		
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	• • • • • • • • • • • • • • • • • • • •	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N				
Α.	Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt		
	Mailing Address 12224 MONTCALM S	03 21 2009				
	City CARMEL	State IN	Zip Code	Transaction ID: INC.A.61941		
	FEC ID number of contributing federal political committee.	C	46032	Amount of Each Receipt this Period 25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00			
В.	Full Name (Last, First, Middle Initial) MR ROSS LUCE Mailing Address 1066 WEST GROVE	Date of Receipt				
		03 21 2009				
	City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.61743 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	13044	30.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	7		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 390.00			
C.	Full Name (Last, First, Middle Initial) MRS CATHY PATTEN			Date of Receipt		
-	Mailing Address 2001 MEADOWS AV	ENUE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City LANTANA	State TX	Zip Code 76226	Transaction ID: INC.A.61868 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	70220	25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on			
	Receipt For: Primary General Other (specify) ▼	-, '	e Year-to-Date ▼ 325.00			
	SUBTOTAL of Receipts This Page (optional)	1		80.00		
	TOTAL This Period (last page this line numbe	er only)				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 11
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person he name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS Mailing Address 2780 FOLKSTONE F City COLUMBUS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General		Date of Receipt M M D D 2 1 2 0 0 9
Other (specify) ▼ Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL City KELLER FEC ID number of contributing	State Zip Code TX 76248	Date of Receipt M M D D Y Y Y Y Y Y Y Y
rederal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation DIR HR Aggregate Year-to-Date 325.00	25.00
Full Name (Last, First, Middle Initial) MRS MONICA REED Mailing Address 8475 DUNHAM STA		Date of Receipt M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
City TAMPA FEC ID number of contributing federal political committee.	State Zip Code FL 33647 C	Transaction ID: INC.A.61832 Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation DIR PHARM PRACTICE Aggregate Year-to-Date 325.00	
SUBTOTAL of Receipts This Page (optional)		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 88 / 186 (check only one) X
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III			Date of Receipt
	Mailing Address 266 BRUSHY CREEK	03 21 2009		
	City LAS VEGAS	State NV	Zip Code 89148	Transaction ID: INC.A.61853 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 780.00	
_ 3.	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE			Date of Receipt
	Mailing Address 6108 HUNTER LANE			03 21 2009
	City	State	Zip Code	Transaction ID: INC.A.61877
	COLLEYVILLE FEC ID number of contributing federal political committee.	C	76034	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
_ :.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt
	Mailing Address 8362 GOLDEN PRAIL	03 21 2009		
	City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.61762 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00047	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
Γ	SUBTOTAL of Receipts This Page (optional) .			135.00

SCHEDULE A (FEC Forn ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16			
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	rts and Statements may not be sold or used by any person using the name and address of any political committee to SINC. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.			
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Mailing Address 5 APPLE ORC City MOORESTOWN FEC ID number of contributing federal political committee.	State Zip Code NJ 08057	Date of Receipt M M D D 2 1 2 0 0 9			
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP/GM Aggregate Year-to-Date ▼ 650.00				
MR JAMES ZIRPOLI	Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI Mailing Address 6691 DEERVIEW DRIVE				
City	State Zip Code	0 3 2 1 2 0 0 9 Transaction ID: INC.A.61795			
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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00				
Full Name (Last, First, Middle Initial)		Date of Receipt			
MS LESLIE ACHTER Mailing Address 821 ALBEMAF	LE STREET	M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O			
City	State Zip Code	Transaction ID: INC.A.61742			
WYCKOFF FEC ID number of contributing federal political committee.	NJ 07481	Amount of Each Receipt this Period 50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR ANALYTICAL SVCS				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00				
SURTOTAL of Receipts This Page (o	otional)	125.00			

		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and addr	ress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK Mailing Address 1021 SUNSET RID	GE		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BRIDGEWATER FEC ID number of contributing	State NJ	Zip Code 08807	Transaction ID: INC.A.61662 Amount of Each Receipt this Period 50.00
Receipt For: Primary Other (specify) ▼	Occupation VP PHAR	M CONTRACT & CONSULTY Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR STEPHEN ADLER Mailing Address 139 BELLVALE LA	Date of Receipt 0 3		
City	State	Zip Code	Transaction ID: INC.A.61741
WARWICK FEC ID number of contributing federal political committee.	C	10990	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) DR JODY ALLEN	I		Date of Receipt
Mailing Address 3031 MOUNT HILL	. DR		03 28 2009
City	State	Zip Code	Transaction ID: INC.A.61740
MIDLOTHIAN FEC ID number of contributing federal political committee.	C	23113	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINIC	CAL POLICY-GOV AFFAIR	S
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 350.00	
			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 91 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and St. or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
, , , , , , , , , , , , , , , , , , ,	OLITICAL ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MARENE ALLISON Mailing Address 4405 WISMER ROAD		Date of Receipt		
City	State Zip Code	0 3 2 8 2 0 0 9 Transaction ID: INC.A.62054		
DOYLESTOWN	PA 18901	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 SECURITY & ASSET PROTECTI	ON .		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO		Date of Receipt		
Mailing Address 19 ROSS ROAD	0 3 2 8 2 0 0 9 Transaction ID: INC.A.61803			
City	·			
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	Occupation VP INFO TECHNOLOGY			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00]		
Full Name (Last, First, Middle Initial) TEJWANSH ANAND		Date of Receipt		
Mailing Address 10 WHIPPOORWILL L		03 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: INC.A.62021		
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 VP INFO TECHNOLOGY			
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	350.00			
SUBTOTAL of Receipts This Page (optional)		150.00		
TOTAL This Period (last page this line number of	·			

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 186 (check only one) X 11a
4	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma le name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) DENNIS AUCH Mailing Address 5788 S. WAI DEN GI	EN DDIVE		Date of Receipt
	Mailing Address 5788 S. WALDEN GI	03 28 2009		
	City	State	Zip Code	Transaction ID: INC.A.62124
	MURRAY	UT	84123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
— В.	Full Name (Last, First, Middle Initial) ERIK BAGIN	Date of Receipt		
	Mailing Address 73 HIGHLAND AVEN	03 / 28 / 2009		
	City State		Zip Code	Transaction ID: INC.A.62057
	GLEN RIDGE FEC ID number of contributing	NJ	07028	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		AL MGR GROUP	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify) ▼		350.00	
с. С.	Full Name (Last, First, Middle Initial) MS BECKIE BARATKO	Date of Receipt		
	Mailing Address 80 N. WOODLAND S	03 / 28 / 2009		
	City ENGLEWOOD	State NJ	Zip Code	Transaction ID: INC.A.61956
	FEC ID number of contributing		07631	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	- · ·	POSAL UNIT	
			e Year-to-Date ▼	_
	Primary General Other (specify) ▼		350.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number		<u> </u>	

ITEMIZED RE	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 186 (check only one)
Any information copor for commercial pu	ed from such Reports and S rposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COM	, ,	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, MR THOMAS BAI	First, Middle Initial)			Date of Receipt
Mailing Address	69 SKYLINE DR			03 28 2009
City	LE DIVED	State	Zip Code	Transaction ID: INC.A.61890
UPPER SADD FEC ID number of federal political c	of contributing	NJ C	07458	Amount of Each Receipt this Period 50.00
Name of Employ	er H SOLUTIONS	Occupation VP INFO	n TECHNOLOGY	
Receipt For: Primary Other (spe	General	+	e Year-to-Date ▼ 350.00	
Full Name (Last, JANE BARLOW	First, Middle Initial)			Date of Receipt
Mailing Address	3 AVALON COURT	03 / 28 / Y Y Y Y Y		
City HOPEWELL J	LINCTION	State NY	Zip Code 12533	Transaction ID: INC.A.62086
FEC ID number of federal political c	of contributing	C	12333	Amount of Each Receipt this Period 50.00
Name of Employ MEDCO HEALT	er H SOLUTIONS	Occupation VP MED	n ICAL POLICIES	
Receipt For: Primary Other (spe	General	, '	Year-to-Date ▼ 350.00	
Full Name (Last, MR MICHAEL BA	First, Middle Initial)			Date of Receipt
	452 MEDWAY ROAD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HIGHLAND H	TICLITS	State OH	Zip Code	Transaction ID: INC.A.62102
FEC ID number of federal political c	of contributing	C	44143	Amount of Each Receipt this Period 192.31
Name of Employed	er H SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
Receipt For: Primary Other (spec	General	, '	Year-to-Date ▼ 1353.86	
SUBTOTAL of Rec	eipts This Page (optional)	1		292.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 186 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and address of any political committ	ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. MR DAVID BAUGH Mailing Address 1813 ADONIS AVE		Date of Receipt
City	State Zip Code	0 3 2 8 2 0 0 9 Transaction ID: INC.A.62009
HENDERSON FEC ID number of contributing federal political committee.	NV 89074	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation MGR BENEFIT DELIVERY SYST Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR PETER BEGANS Mailing Address 1605 CHARNITA CT		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City VIENNA FEC ID number of contributing	State Zip Code VA 22182	Transaction ID: INC.A.61858 Amount of Each Receipt this Period
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP GOVERNMENT AFFAIRS	100.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) C. MR STEPHEN BELL		Date of Receipt
Mailing Address 24 GLENWOOD ROA	ND .	03 / 28 / 2009
City <u>UPPER SADDLE RIVER</u>	State Zip Code NJ 07458	Transaction ID: INC.A.62024 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: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional) .	I	200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN Mailing Address 4520 LINWOOD LA City DEEPHAVEN FEC ID number of contributing federal political committee.	State Zip Code MN 55331	Date of Receipt 0 3
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation SVP CLIENT & MKT STRATEGIC D Aggregate Year-to-Date 350.00	EV
Full Name (Last, First, Middle Initial) MR MARK BLAKE Mailing Address 129 NORWOOD A		Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MONTCLAIR FEC ID number of contributing federal political committee.	State Zip Code NJ 07043	Transaction ID: INC.A.62069 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP BUSINESS DEV Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN Mailing Address 50 NEW ENGLANI	D DR	Date of Receipt 0 3 2 8 2 0 0 9
City RAMSEY FEC ID number of contributing	State Zip Code NJ 07446	Transaction ID: INC.A.61849 Amount of Each Receipt this Period 50.00
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING & PRODUCT DEV	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)l	150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 186 (check only one) X 11a
\	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) KEN BODMER			Date of Receipt
	Mailing Address P.O. BOX 381947	03 / 28 / 2009		
	City GERMANTOWN	State TN	Zip Code 38183	Transaction ID: INC.A.61926 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation SVP FIN		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1344.00	
Б.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 6527 SHORBURGH E	Date of Receipt		
	Mailing Address 6527 SHORBURGH L	03 28 2009		
	City Stat INDIANAPOLIS IN		Zip Code 46278	Transaction ID: INC.A.61639 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	102.70	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	on ARM PRACTICE	7
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 325.00	
С.	Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN			Date of Receipt
	Mailing Address 5259 FISHERCREST	LN		03 28 2009
	City RICHMOND	State VA	Zip Code 23231	Transaction ID: INC.A.61963 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FOR	MULARY CONSULTING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1400.00	
	SUBTOTAL of Receipts This Page (optional) .	1		417.00
İ	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 97 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persor the name and address of any political committee to see. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN Mailing Address 15 DAWN LANE City RINGWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07456 C Occupation EXEC DIR STRAT PRODUCT MGMT Aggregate Year-to-Date 350.00	Date of Receipt M M A 28 2009 Transaction ID: INC.A.62005 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MS PATRICIA BRANUM Mailing Address 210 FROG HOLLOV City COATESVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	V ROAD State Zip Code PA 19320 C Occupation VP INFO & PROCESS ENGINEERING Aggregate Year-to-Date ▼ 525.00	Date of Receipt M M M / D D D / Y Y Y Y Y Q 3
Full Name (Last, First, Middle Initial) MR JOHN BRENNAN Mailing Address 2 CARMEN LANE City FLEMINGTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 08822 C Occupation VP AUDIT Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) >	175.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR KENNETH BROWN Mailing Address 540 GIORDANO DRIV	/E		Date of Receipt
	Maining Addition 540 GIONDANO DAIN	V L		03 28 2009
	City	State NY	Zip Code	Transaction ID: INC.A.61707
	YORKTOWN HEIGHTS FEC ID number of contributing federal political committee.	C	10598	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENT	on ERPRISE BUS INTELLIGEN	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) AMANDA BUNDY			Date of Receipt
	Mailing Address 5812 SEVEN POINTS TRACE			03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.62119
	HERMITAGE	TN	37076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer ACCREDO HEALTH GROUP	_	MBURSEMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
C.	Full Name (Last, First, Middle Initial) MR KEVIN BURON			Date of Receipt
	Mailing Address 25 TIMBERLAND			03 / 28 / 2009
	City ALISO VIEJO	State CA	Zip Code 92656	Transaction ID: INC.A.61830 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENER/	on AL MGR GROUP	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
	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 99 / 186 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS DOREEN CALDER Mailing Address 441 S ELM STREET			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City MAYWOOD FEC ID number of contributing federal political committee.	State NJ	Zip Code 07607	Transaction ID: INC.A.61636 Amount of Each Receipt this Period 40.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		n SINESS REQUIREMENTS 2 Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI Mailing Address 119 WASHINGTON A	AVENUE		Date of Receipt 0 3 2 8 2 0 0 9
City CHATHAM FEC ID number of contributing federal political committee.	State NJ	Zip Code 07928	Transaction ID: INC.A.61909 Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	- ' '	n ONTROLLER e Year-to-Date ▼ 1346.17	
Full Name (Last, First, Middle Initial) MR RAYMOND CARLUCCI Mailing Address 24 SHERI DRIVE			Date of Receipt
City ALLENDALE FEC ID number of contributing federal political committee.	State NJ	Zip Code 07401	0 3 2 8 2 0 0 9 Transaction ID: INC.A.61921 Amount of Each Receipt this Period 52.50
Name of Employer ACCREDO HEALTH GROUP Receipt For:	- '	n VP MARKET STRATEGY & e Year-to-Date ▼	DEV
Primary General Other (specify) ▼		367.50	
SUBTOTAL of Receipts This Page (optional))	284.81

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 186 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	the name and add	ress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VIS	STA State	Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
VERADALE FEC ID number of contributing federal political committee.	WA	99037	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP/GM Aggregate	Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) JEFFREY COOLE Mailing Address 155 ASTON HALL	DRIVE		Date of Receipt 0 3 2 8 2 0 0 9
City EADS FEC ID number of contributing	State TN	Zip Code 38028	Transaction ID: INC.A.62117 Amount of Each Receipt this Period 50.00
Receipt For: Primary Other (specify) ▼	Occupation VP TAX A	ND REGULATORY REPOR Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) ANTONIO CORREIA Mailing Address 19 WILLIAMS LANI	<u> </u>		Date of Receipt
City CHAPPAQUA FEC ID number of contributing federal political committee.	State NY	Zip Code 10514	Transaction ID: INC.A.62075 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	 	VESS DEV Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	(125.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 186 (check only one) X
Ai	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	y not be sold or used by any perso dress of any political committee to	
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN Mailing Address 25 FAIRWAY TRAIL			Date of Receipt
	City	State	Zip Code	0 3 2 8 2 0 0 9 Transaction ID: INC.A.61804
	SPARTA	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHA	n ARMACY NETWORK MGMT	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
_	Full Name (Last, First, Middle Initial) MR HART COVEN			Date of Receipt
	Mailing Address 28 OAK LANE			03 / 28 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61898
	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		TECHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify) ▼	0 0	350.00	
	Full Name (Last, First, Middle Initial) MR ROBERT CRAIG			Date of Receipt
	Mailing Address 7979 E SANTA CATA	ALINA DR		03 28 7 2009
	City	State	Zip Code	Transaction ID: INC.A.61789
	SCOTTSDALE	AZ	85255	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer MEDCO HEALTH SOLUTIONS		R PRODUCT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	
<u>ر</u>	SUBTOTAL of Receipts This Page (optional)	1		302.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	C. POLITICAL ACTION COMMITTEE (a.k.a.	,
MR KENNETH DANIELS Mailing Address 2903 CHUKKAR Co	OURT	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City PLANT CITY	State Zip Code FL 33567	Transaction ID: INC.A.61882 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) MS MARY DASCHNER		Date of Receipt
Mailing Address 2926 EWING AVE	03 28 2009	
City	State Zip Code MN 55416	Transaction ID: INC.A.61773
MINNEAPOLIS FEC ID number of contributing federal political committee.	MN 55416	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP PRES RETIREE SOLUTION	S
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1346.10	
Full Name (Last, First, Middle Initial) MR ANDREW DAVIS Mailing Address 5616 BROOK DRIV	/E	Date of Receipt
City	State Zip Code	0 3 2 8 2 0 0 9 Transaction ID: INC.A.61786
EDINA	MN 55439	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 MEDICARE CLIENT & SALES SU	P
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	(ls	267.30
TOTAL This Period (last page this line num	nber 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 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR DANIEL DAVISON			Date of Receipt
	Mailing Address 402 HIGHLAND AVE			03 28 2009
	City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.61922 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN	on IANCIAL PLANNING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) MICHEL DUFRESNE Mailing Address 58 INDEPENDENCE	MAY		Date of Receipt
	Mailing Address 58 INDEPENDENCE	VV A Y		03 28 2009
	City MORRIS TWP	State NJ	Zip Code 07960	Transaction ID: INC.A.62027 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.000	192.30
	Name of Employer MEDCO HEALTH SOLUTIONS		ERPRISE BUS INTELLIGEN	CE
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10	
C.	Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY			Date of Receipt
	Mailing Address 14026 KNOX STREE	Т		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City OVERLAND PARK	State KS	Zip Code 66221	Transaction ID: INC.A.61745 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	COLLI	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE	on ES SEGMENT LEADER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .)	292.30
	TOTAL This Period (last page this line number	r only)		

		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) DR SUMIT DUTTA			Date of Receipt
Mailing Address 534 HUDSON STR	EET		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.61839
NEW YORK FEC ID number of contributing federal political committee.	C	10014	Amount of Each Receipt this Period 77.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 539.00	
Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS			Date of Receipt
Mailing Address 109 KAREN PLACE			03 / 28 / 2009
City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.61706 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.70	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD			Date of Receipt
Mailing Address 128 SUMMIT AVEN	IUE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City UPPER MONTCLAIR	State NJ	Zip Code 07043	Transaction ID: INC.A.62049
FEC ID number of contributing federal political committee.	C	07045	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MEDICAL	n RE CHIEF MEDICAL OFFIC	EER
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	l)		177.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 186 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	ne name and addre	ss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN Mailing Address 359 LONG HILL ROA City BRIARCLIFF MANOR FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NY C Occupation VP CORP (Zip Code 10510 COMMUNICATIONS ear-to-Date ▼	Date of Receipt M M M
Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN Mailing Address 75 TWEED BLVD City UPPER GRANDVIEW FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	- '	Zip Code 10960 MEDICAL&ANLYTC AFFF ear-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI Mailing Address 15804 SORAWATER City LITHIA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State FL C Occupation NATL ACC	Zip Code 33547 T EXEC ear-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	1		277.31

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 186 (check only one) X
(Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) RICHARD FARIS Mailing Address 2020 HEATHER COVE	State	Zip Code	Date of Receipt M M M
	MEMPHIS FEC ID number of contributing federal political committee.	C	38119	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify) ▼		n TH OUTCOME SOLUTIONS Year-to-Date ▼ 350.00	
- З.	Full Name (Last, First, Middle Initial) SUSAN FAUST Mailing Address 6614 HERONSWOOD	COVE		Date of Receipt 0 3 2 8 2 0 0 9
	City	State	Zip Code	Transaction ID: INC.A.62113
	MEMPHIS FEC ID number of contributing federal political committee.	C	38119	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP Receipt For:	_	n NT SLS AND MGD CARE Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
- :.	Full Name (Last, First, Middle Initial) DR RICHARD FEIFER Mailing Address 32 EILEEN DR			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.61777
	MAHWAH FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ENHANCING SOLUTIONS	3
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			150.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) MEDCO HEALTH SOLUTIONS INC: POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) MITHOMAS FEITEL Mailing Address 58 APPLE HILL DR City State Zip Code NITHOMAS FEITEL Mailing Address 58 APPLE HILL DR City State Zip Code NITHOMAS FEITEL Mailing Address 58 APPLE HILL DR City State Zip Code NITHOMAS FEITEL NITHOMAS FEITEL Mailing Address 58 APPLE HILL DR City State Zip Code NITHOMAS FEITEL NITHOMAS FEITEL Mailing Address 485 OLD STONE RD City State Zip Code NITHOMAS FEITEL NITHOMAS FEITEL NITHOMAS FEITEL Date of Receipt In Transaction ID: INC Actists in Tran	SCHEDULE A (FEC FOITEMIZED RECEIPTS	rm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Full Name (Last, First, Middle Initial) MR THOMAS FETEL Mailing Address 58 APPLE HILL DR City City State Zip Code GILLETTE NJ 07993 Amount of Each Receipt tins Period FEC ID number of contributing federal political committee. Name of Employer Primary General Other (specify) ▼ State Zip Code NJ 07993 Amount of Each Receipt tins Period Aggregate Year-to-Date ▼ Transaction ID: INC.A.61881 Amount of Each Receipt tins Period 192.23 Transaction ID: INC.A.61881 Amount of Each Receipt tins Period 192.23 Transaction ID: INC.A.61788 Amount of Each Receipt tins Period 192.23 Transaction ID: INC.A.61788 Amount of Each Receipt tins Period 192.23 Transaction ID: INC.A.61788 Transaction ID: INC.A.62091 Transaction ID: INC.A.	or for commercial purposes, other the NAME OF COMMITTEE (In Full	an using the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Other (specify) ▼ 1345.61	Full Name (Last, First, Middle In MR THOMAS FEITEL Mailing Address 58 APPLE City GILLETTE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State NJ Occupation SVP COI	Zip Code 07933	Date of Receipt 0 3 28 2009 Transaction ID: INC.A.61831
City State Zip Code NJ 07450 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS C	Other (specify) ▼ Full Name (Last, First, Middle In MR EDWARD FISCHER	,	1345.61	M M / D D / Y Y Y Y
Mailing Address 6 MORGAN AVE City State Zip Code NORWALK CT 06851 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M	RIDGEWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	Occupation VP CLIN	07450 1 CAL PROD INTEGRATION Year-to-Date ▼	Transaction ID: INC.A.61768 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional)	MEGHAN FITZGERALD Mailing Address 6 MORGAN City NORWALK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State CT C Occupation SVP BUS	06851 n SINESS DEVELOPMENT Year-to-Date	Transaction ID: INC.A.62091 Amount of Each Receipt this Period
	SUBTOTAL of Receipts This Page	e (optional)		434.54

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 186 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) KEVIN FRANCO Mailing Address 648 RIVERSIDE DR #222 City MEMPHIS FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State TN C Occupation VP FINA Aggregate		Date of Receipt M M M
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO Mailing Address 9 GREEN HILL TRAIL City TROPHY CLUB FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State TX C Occupation VP NATI	Zip Code 76262 n ONAL SERVICE CENTER Year-to-Date	Date of Receipt M M M
Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL Mailing Address 1434 NARRAGANSET City CRANSTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State RI C Occupation DIR GOV	Zip Code 02905 n / AFFAIRS Year-to-Date ▼	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)			130.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17	
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions	
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
Α.	Full Name (Last, First, Middle Initial) FELIX FRUEH Mailing Address 14401 FALLING LEAF	DRIVE		Date of Receipt	
				03 28 2009	
	City	State	Zip Code	Transaction ID: INC.A.62092	
	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	Occupation VP RES	on EARCH & DEVELOPMENT		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		350.00		
- В.	Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI			Date of Receipt	
	Mailing Address 24 MOREHOUSE PL			03 / 28 / 2009	
	City State		Zip Code	Transaction ID: INC.A.61624	
	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 & CC	DUNSEL		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify) ▼		350.00		
-).	Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI			Date of Receipt	
	Mailing Address 720 N. LARRABEE APT 1701			03 / 28 / 2009	
	CHICAGO	State IL	Zip Code	Transaction ID: INC.A.62004	
	CHICAGO	IL.	60654	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		192.31	
	Name of Employer MEDCO HEALTH SOLUTIONS		SENERAL MGR		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,	
	Other (specify)		1346.17		
	SUBTOTAL of Receipts This Page (optional)			292.31	
-	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number				

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	5 A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 186 (check only one)			
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may	/ 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 I	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO			Date of Receipt			
Mailing Address 69 LAKEVIEW D	Mailing Address 69 LAKEVIEW DR					
City OLD TAPPAN	State NJ	Zip Code 07675	Transaction ID: INC.A.61866 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 CLIEI	n NT RELATIONS				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial) MICHAEL GALVIN	 		Date of Receipt			
Mailing Address 25 BALLYMEADE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.62032 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	12000	192.31			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/CHI	n EF INFRASTRUCTURE OF	FR			
Receipt For: Primary General Other (specify) ▼	· · · · · · · · · · · · · · · · ·	Year-to-Date ▼ 1346.17				
Full Name (Last, First, Middle Initial) MR PETER GAYLORD	<u> </u>		Date of Receipt			
Mailing Address 1201 BRIDGE ST	REET		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City ASBURY PARK	State NJ	Zip Code 07712	Transaction ID: INC.A.61623			
FEC ID number of contributing federal political committee.	C	07/12	Amount of Each Receipt this Period 60.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP TRE	n EASURY & FINANCIAL EVA	— L\$			
Receipt For: Primary General Other (specify) ▼	'	Year-to-Date ▼ 390.00				
SUBTOTAL of Receipts This Page (option	nal)		302.31			

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 186 (check only one) X
4	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA			Date of Receipt
	Mailing Address 20 BROOKSHIRE DR			03 28 2009
	City ROBBINSVILLE	State NJ	Zip Code 08691	Transaction ID: INC.A.61747 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio GENERA	n AL MGR GROUP	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- 3.	Full Name (Last, First, Middle Initial) MATTHEW GIBBS			Date of Receipt
	Mailing Address 27 N. WACKER DR. SUITE 246			03 28 2009
	City CHICAGO	State IL	Zip Code	Transaction ID: INC.A.62083
	FEC ID number of contributing federal political committee.	C	60606	Amount of Each Receipt this Period 75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio CHIEF C	n CLINICAL OFFICER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
. –	Full Name (Last, First, Middle Initial) MR THOMAS GILSON			Date of Receipt
	Mailing Address 2 PELL FARM ROAD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.61997 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07436	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n EENERAL MGR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
	SUBTOTAL of Receipts This Page (optional) .			317.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements 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 solicit contributions from such committee.			
1 1	POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)			
Full Name (Last, First, Middle Initial) MR SCOTT GILYARD		Date of Receipt			
Mailing Address 305 BERGAMOT DRI	State Zip Code	0 3 2 8 2 0 0 9 Transaction ID: INC.A.61629			
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	Occupation PRES UHG				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1346.10				
Full Name (Last, First, Middle Initial) MR JONAH GITLITZ	I .	Date of Receipt			
Mailing Address 43 OVERLOOK RIDG	Mailing Address 43 OVERLOOK RIDGE				
City	State Zip Code	0 3 2 8 2 0 0 9 Transaction ID: INC.A.61693			
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 ACCT EXEC				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial) MR JAMES GRANT, JR		Date of Receipt			
Mailing Address 1928 BEVERLY LANE	<u> </u>	03 / 28 / 2009			
City	State Zip Code	Transaction ID: INC.A.61760			
BUFFALO GROVE FEC ID number of contributing federal political committee.	IL 60089	Amount of Each Receipt this Period 50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCIAL INSIGHTS				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00				
SUBTOTAL of Receipts This Page (optional) .		292.30			
TOTAL This Period (last page this line numbe	·				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS GINA GRUHN			Date of Receipt
	Mailing Address 13 WEATHER VANE	DRIVE		03 / 28 / 2009
	City CONVENT STATION	State NJ	Zip Code 07960	Transaction ID: INC.A.61823 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07900	40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGION	on IAL VP SALES-SYSTEMED	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 280.00	
В.	Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD			Date of Receipt
	Mailing Address 264 HARVEST AVE			03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61688
	STATEN ISLAND FEC ID number of contributing federal political committee.	C	10310	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CON	SUMER DRIVEN MKTS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00]
C.	Full Name (Last, First, Middle Initial) MR RICHARD GUIOR			Date of Receipt
	Mailing Address 50 BELLEVUE AVE			03 / 28 / 2009
	City SUMMIT	State NJ	Zip Code 07901	Transaction ID: INC.A.61646 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07901	90.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 630.00	
	SUBTOTAL of Receipts This Page (optional)	1		180.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 114 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be see name and address of	sold or used by any perso any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION	N COMMITTEE (a.k.a	a. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MS VALERIE HAERTEL			Date of Receipt		
Mailing Address 7 PARSLOE COURT		Code	03 28 2009		
City <u>MAHWAH</u>		Code 430	Transaction ID: INC.A.62072 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INVESTOR	RELATIONS			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 350.00			
Full Name (Last, First, Middle Initial) MR MARK HALLORAN Mailing Address 10 KINGS BIRGS BO) AD		Date of Receipt		
Mailing Address 19 KINGS RIDGE RO	Mailing Address 19 KINGS RIDGE ROAD				
City LONG VALLEY		Code 353	Transaction ID: INC.A.61896		
FEC ID number of contributing federal political committee.	C	1 1 1	Amount of Each Receipt this Period 192.31		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF INFO OF	FICER			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 1346.17			
Full Name (Last, First, Middle Initial) MR GREGORY HANSEN			Date of Receipt		
Mailing Address 1659 ISABELLA PAF	KWAY		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	•	Code	Transaction ID: INC.A.62003		
CHASKA FEC ID number of contributing federal political committee.	MN 553	318	Amount of Each Receipt this Period 50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACCT SVCS	S & ADMIN			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-				
SUBTOTAL of Receipts This Page (optional)	1		292.31		
TOTAL This Period (last page this line number		<u> </u>			

SCHEDULE A (FEC Form	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 115/186 (check only one) X 11a			
Any information copied from such Repo or for commercial purposes, other than	rts and Statements may not be using the name and address of	sold or used by any perso any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	SINC. POLITICAL ACTIO	N COMMITTEE (a.k.a	. Medco Health PAC)			
Full Name (Last, First, Middle Initial) MR PETER HARTY			Date of Receipt			
	Mailing Address 19520 YELLOW WING COURT					
City COLORADO SPRINGS		o Code 0908	Transaction ID: INC.A.61626 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 GOVERNM	ENT AFFAIRS				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to					
Full Name (Last, First, Middle Initial) DAN HAYES	I		Date of Receipt			
Mailing Address 4679 AYRON	03 28 2009					
City PALM HARBOR		Code 1685	Transaction ID: INC.A.62109			
FEC ID number of contributing federal political committee.	C	1	Amount of Each Receipt this Period 50.00			
Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS					
Receipt For: Primary General Other (specify)	Aggregate Year-to	o-Date ▼ 350.00				
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 Y Y O O O O O O O O O O O O O			
City SUCCASUNNA	•	o Code 7876	Transaction ID: INC.A.61689			
FEC ID number of contributing federal political committee.	C	870	Amount of Each Receipt this Period 75.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIENT SO	LUTIONS				
Receipt For: Primary General Other (specify)	Aggregate Year-to	525.00				
SUBTOTAL of Receipts This Page (or	tional)		317.31			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 186 (check only one) X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ERIC HESS Mailing Address 10 CARLTON RD City FLANDERS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State Zip Code NJ 07836 C Occupation VP ENGINEERING & OPS Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) SHERLYN HOBGOOD Mailing Address 6635 LAMBERT DR City MASON	State Zip Code TN 38049	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	Occupation AVP NURSING SPEC PROGRAMS Aggregate Year-to-Date 350.00	50.00
Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON Mailing Address 1 HERITAGE RD City	State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FLORHAM PARK FEC ID number of contributing federal political committee.	NJ 07932	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	Occupation REGIONAL VP PHARMACIES Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional		150.00

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 186 (check only one) X
or for co	rmation copied from such Reports and S immercial purposes, other than using the E OF COMMITTEE (In Full) DCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full I	Name (Last, First, Middle Initial) GLENN HOFFMAN		(4	Date of Receipt
	ng Address 974 HILLCREST ROAI			03 / 28 / 2009
City RID	GEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.61940 Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C	0,100	50.00
Nam MED	e of Employer ICO HEALTH SOLUTIONS	Occupatio VP FACI		
Rece	eipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 350.00	
. MR F	Name (Last, First, Middle Initial) ROGER HOLLAND ng Address 41 SAINT RAPHAEL			Date of Receipt
City		State	Zip Code	03 28 2009
•	GUNA NIGUEL	CA	92677	Transaction ID: INC.A.61862 Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C		50.00
Nam MED	e of Employer ICO HEALTH SOLUTIONS	Occupatio VP SALE		
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	Name (Last, First, Middle Initial) ABETH HOLLOWAY			Date of Receipt
Maili	ng Address 9222 RANDLE VALLE	Y DR		03 28 2009
City	RDOVA	State TN	Zip Code 38018	Transaction ID: INC.A.62133 Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C	00010	40.00
Nam ACC	e of Employer REDO HEALTH GROUP	Occupatio ASSISTA	n ANT GENERAL COUNSEL	
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 280.00	
QUIDTO	DTAL of Receipts This Page (optional)	l		140.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 49 S HILLSIDE AVE City ELMSFORD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General		Zip Code 10523 n RVENTION DELIVERY SYS e Year-to-Date ▼	Date of Receipt M M 28 2009 Transaction ID: INC.A.61893 Amount of Each Receipt this Period 80.00
– В.	Other (specify) ▼ Full Name (Last, First, Middle Initial) RITA HOLT Mailing Address 1558 N PISGAH ROAD City CORDOVA FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP	State TN C	Zip Code 38016	Date of Receipt 0 3 28 2009 Transaction ID: INC.A.62116 Amount of Each Receipt this Period 50.00
– C.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MS CYNTHIA HORN Mailing Address 9553 ANDREW DR	1 1	e Year-to-Date ▼ 350.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 28 2009
	City TWINSBURG FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	Occupation VP CUS Aggregate		Transaction ID: INC.A.62104 Amount of Each Receipt this Period 50.00
	SUBTOTAL of Receipts This Page (optional)			180.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	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 STEVEN HOROWITZ Mailing Address AMELIOCA COLUBI			Date of Receipt
	Mailing Address 4 MELISSA COURT			03 28 7 2009
	City MONTVILLE	State NJ	Zip Code 07045	Transaction ID: INC.A.62067 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07045	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n INESS PLANNING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) MR JEFFREY HULL			Date of Receipt
	Mailing Address 2616 S 3B'S & K RD			03 28 2009
	Cal Fala	State OH	Zip Code	Transaction ID: INC.A.61875
	GALENA FEC ID number of contributing federal political committee.	C	43021	Amount of Each Receipt this Period 32.00
	Name of Employer MEDCO HEALTH SOLUTIONS	. '	HLTH CARE OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 216.00	
с. С.	Full Name (Last, First, Middle Initial) MRS KIMBERLY HUMPHRIES			Date of Receipt
	Mailing Address 3726 ST PHILIP			03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.62134
	BARTLETT FEC ID number of contributing federal political committee.	C	38133	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUSI	n INESS PLANNING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			132.00
Ì	TOTAL This Period (last page this line number	only)		

ITEMIZED	E A (FEC Form 3X) RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 186 (check only one)
Any information of or for commercial	opied from such Reports and purposes, other than using t	d Statements may he name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
\ \	DMMITTEE (In Full) EALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (La MR DAVID ISF	st, First, Middle Initial)			Date of Receipt
Mailing Addre	ss 730 COLUMBUS AV	'ENUE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	,	State	Zip Code	Transaction ID: INC.A.61631
NEW YORK FEC ID numb federal politica	er of contributing	C	10025	Amount of Each Receipt this Period 50.00
Name of Emp MEDCO HEA	loyer LTH SOLUTIONS	Occupation VP BUSI	n NESS DEV	_
Receipt For: Primary Other (s	General pecify) ▼	1	e Year-to-Date ▼ 350.00	
Full Name (La	st, First, Middle Initial)			Date of Receipt
Mailing Addre		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City GAINESVIL	State FL		Zip Code 32608	Transaction ID: INC.A.61642
	er of contributing	C	32000	Amount of Each Receipt this Period 50.00
Name of Emp MEDCO HEA	loyer LLTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
Receipt For: Primary Other (s	General		e Year-to-Date ▼ 350.00	
Full Name (La MS MARIANNI	st, First, Middle Initial)			Date of Receipt
	ss 329 MORRIS AVEN	UE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MOUNTAIN	II VKEG	State NJ	Zip Code 07046	Transaction ID: INC.A.61671
•	er of contributing	C	0/040	Amount of Each Receipt this Period 50.00
Name of Emp MEDCO HEA	loyer LTH SOLUTIONS	Occupation SR NATL	n _ ACCT EXEC	
Receipt For: Primary Other (s	General pecify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of I	Receipts This Page (optional)			150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	ne (cricer orly orle)
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by a the name and address of any political com	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
	C. POLITICAL ACTION COMMITTEE	E (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR WILLIAM JACKSON Mailing Address 56 WARREN RD		Date of Receipt
City WEST ORANGE	State Zip Code NJ 07052	Transaction ID: INC.A.61975 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 MEDICARE OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	.00
Full Name (Last, First, Middle Initial) MR JASON JAMES		Date of Receipt
Mailing Address RR 2 BOX 2036		03 28 2009
City	State Zip Code	Transaction ID: INC.A.61635
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 PHYSICIAN ENGAGEME	:NT
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	230	.00
Full Name (Last, First, Middle Initial) MR TODD JEFFREY		Date of Receipt
Mailing Address 15 ELIZABETH ST	REET	03 28 2009
City	State Zip Code	Transaction ID: INC.A.61989
DUMONT FEC ID number of contributing	NJ 07628	Amount of Each Receipt this Period
federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHARM CONTRACT & CO	DNSULTING
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	.00
OUDTOTAL of Descripto This Descriptor	l)	135.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th 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.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ROBERT JINKS			Date of Receipt
	Mailing Address 22 PAGE AVE	03 28 7 2009		
	City LYNDHURST	State NJ	Zip Code 07071	Transaction ID: INC.A.61680 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07071	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUS	on INESS REQUIREMENTS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- В.	Full Name (Last, First, Middle Initial) MRS REGINA JONES	750045		Date of Receipt
	Mailing Address POST OFFICE BOX	03 28 2009		
	City LAS VEGAS	State NV	Zip Code 89136	Transaction ID: INC.A.61770
	FEC ID number of contributing federal political committee.	C	69130	Amount of Each Receipt this Period 50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP CUS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
_ С.	Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
	Mailing Address 12224 MONTCALM S	Mailing Address 12224 MONTCALM STREET		
	City CARMEL	State IN	Zip Code 46032	Transaction ID: INC.A.61942 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10002	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional) .	1		125.00
	TOTAL This Period (last page this line numbe			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
\ A .	Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD	OZITIONE,	101101100111111111111111111111111111111	Date of Receipt
	Mailing Address 16357 VICTORIA CUF		7:- 0-4-	03 / 28 / 2009
	City PRIOR LAKE	State MN	Zip Code 55372	Transaction ID: INC.A.61817 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLII	on ENT & MKT PROG STRAT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 245.00	
3.	Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE Mailing Address 995 PINES TERR			Date of Receipt
	City	State	Zip Code	03 28 2009
	FRANKLIN LAKES	NJ	07417	Transaction ID: INC.A.61723 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN	on IANCIAL & ANALYTICAL SV	С
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 350.00	
- ;.	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III			Date of Receipt
	Mailing Address 1970 WOODLANDS P	'L		03 28 2009
	City POWELL	State OH	Zip Code 43065	Transaction ID: INC.A.61867
	FEC ID number of contributing federal political committee.	C	43063	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	on AL MGR GROUP	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)	1		135.00
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 124 / 186 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS LISA KETNER Mailing Address 7 POINT VIEW City OAKLAND FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	-, '	Zip Code 07436 on BER STRATEGY e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y 2 8 / 2 0 0 9 Transaction ID: INC.A.61855 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER Mailing Address 121 CONKLING TOW City CHESTER FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NY C Occupatio SR DIR /	Zip Code 10918 nn ACCT MGMT e Year-to-Date ▼	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) KENNETH KLEPPER Mailing Address 295 GLEN PLACE City FRANKLIN LAKES FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07417 n CHIEF OPERATING OFFICE e Year-to-Date 1346.10	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line number		•	292.30

Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) MS BARBARA KRZAK Mailing Address 495 ISLAND WAY City FRANKLIN LAKES FEC ID number of contributing federal political committee. Name of Employer	may not be sold or used by any perso address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI Mailing Address 920 CLARK STREET City State BOWLING GREEN OH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Aggree Other (specify) Primary General Other (specify) Other (specify) Full Name (Last, First, Middle Initial) MS BARBARA KRZAK Mailing Address 495 ISLAND WAY City State FRANKLIN LAKES NJ FEC ID number of contributing federal political committee. Name of Employer Occupa	L ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) MS BARBARA KRZAK Mailing Address 495 ISLAND WAY City FRANKLIN LAKES FEC ID number of contributing federal political committee. Name of Employer Name of Employer Name of Employer Name of Employer Name of Employer Name of Employer Name of Employer Name of Employer Name of Employer Occupa	Zip Code 43402	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
MS BARBARA KRZAK Mailing Address 495 ISLAND WAY City State FRANKLIN LAKES NJ FEC ID number of contributing federal political committee. Name of Employer Occupa	ation ATL ACCT EXEC gate Year-to-Date ▼ 350.00	
FRANKLIN LAKES FEC ID number of contributing federal political committee. Name of Employer Name of Employer Occupa		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS VP E-0	07417	Transaction ID: INC.A.61902 Amount of Each Receipt this Period 55.00
Receipt For: Primary General Other (specify) ▼	ation COM STRATEGY & DELIVERY pate Year-to-Date ▼ 385.00	,
Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN Mailing Address 2735 YORK RD		Date of Receipt 0 3 2 8 2 0 0 9
City State COLUMBUS OH	Zip Code 43221	Transaction ID: INC.A.61953 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		50.00
	ONAL VP PHARMACIES	
Receipt For: Primary General Other (specify)	gate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		155.00

ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 186 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	CTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MARK LANDY			Date of Receipt
Mailing Address 18 LADIK PL			03 28 2009
City	State	Zip Code	Transaction ID: INC.A.61899
MONTVALE FEC ID number of contributing federal political committee.	NJ C	07645	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SVC I	DELIVERY SYSTEM	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) JAMES LANGLEY			Date of Receipt
Mailing Address 10921 MAIN RANG	iling Address 10921 MAIN RANGE TRAIL		
City LITTLETON	State CO	Zip Code 80127	Transaction ID: INC.A.62129
FEC ID number of contributing federal political committee.	C	00127	Amount of Each Receipt this Period 50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP RFIM	BURSEMENT	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER			Date of Receipt
Mailing Address 7017 COBALT WAY	Y		03 28 2009
City CITRUS HEIGHTS	State CA	Zip Code 95621	Transaction ID: INC.A.61857
FEC ID number of contributing federal political committee.	C	93021	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR G	GOVERNMENT AFFAIRS	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	
SUBTOTAL of Receipts This Page (optiona	I		275.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements 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 a solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JOSEPH LENZ Mailing Address 74 IRON CREEK COU	DT SOLITU		Date of Receipt
	APT 101			03 28 2009
	City COLLIERVILLE	State TN	Zip Code 38017	Transaction ID: INC.A.62052 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30017	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PERI	n FORMANCE STRATEGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) MR ROBERT LONG Mailing Address 18 HARLIND TERRAC	-		Date of Receipt
	Mailing Address 18 HARLIND TERRAC	03 28 2009		
	City	State	Zip Code	Transaction ID: INC.A.61847
	RAMSEY FEC ID number of contributing federal political committee.	NJ C	07446	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n L ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
С.	Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
	Mailing Address 1066 WEST GROVE C	T		03 / 28 / 2009
	City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.61744
	FEC ID number of contributing federal political committee.	C	13044	Amount of Each Receipt this Period 30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 390.00	
	SUBTOTAL of Receipts This Page (optional)		.	130.00
	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 186 (check only one)	
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
Full Name (Last, First, Middle Initial) MR KENNETH MALLEY			Date of Receipt	
Mailing Address 764 W. SADDLE I	RIVER ROAD		03 28 2009	
City HO HO KUS	State NJ	Zip Code 07423	Transaction ID: INC.A.61772	
FEC ID number of contributing federal political committee.	C	07423	Amount of Each Receipt this Period 50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROI	n DUCT & CHANNEL MKTING		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 350.00		
Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO			Date of Receipt	
	Mailing Address 33 HICKORY TAVERN RD			
City GILLETTE	State NJ	Zip Code 07933	Transaction ID: INC.A.61644 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	07333	50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA			
Receipt For: Primary General Other (specify) ▼	- + +	e Year-to-Date ▼ 350.00		
Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address 31 UNDERWOOD	DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City WEST ORANGE	State NJ	Zip Code 07052	Transaction ID: INC.A.62082	
FEC ID number of contributing federal political committee.	C	07032	Amount of Each Receipt this Period 50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST GE	n ENERAL COUNSEL		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00		
SUBTOTAL of Receipts This Page (option	nal)		150.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL Mailing Address W144 N7150 TERRAC		` `	Date of Receipt
		State	Zip Code	0 3 28 2009
	City MENOMONEE FALLS	WI	53051	Transaction ID: INC.A.61797 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	7
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
- 3.	Full Name (Last, First, Middle Initial) THOMAS MARTIN			Date of Receipt
	Mailing Address 1882 E LAUREL HOLL	03 28 2009		
	City	State	Zip Code	Transaction ID: INC.A.62131
	GERMANTOWN	<u>TN</u>	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 PRESIDI	on ENT - CCS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00]
	Full Name (Last, First, Middle Initial) MR TODD MARTIN			Date of Receipt
	Mailing Address 11825 SHEPPARDS C	ROSSING		03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61754
	CLARKSVILLE FEC ID number of contributing federal political committee.	C	21029	Amount of Each Receipt this Period 192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	on GENERAL MGR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10	
	SUBTOTAL of Receipts This Page (optional)			292.30
	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 130 / 186 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	e name and add	lress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JEFFREY MAY Mailing Address 137 WASHINGTON A City HILLSDALE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State NJ C Occupation SVP DRL	Zip Code 07642 DG DISTRIB & CONTROL Year-to-Date ▼	Date of Receipt M M M
Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE Mailing Address 11 JARDINE COURT City MORRIS PLAINS FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)		Zip Code 07950	Date of Receipt M M M / D D / Y Y Y Y Y 0 3 2 8 2 0 0 9 Transaction ID: INC.A.61778 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) THOMAS MCCANN Mailing Address 9600 DOVE SPRING City GERMANTOWN FEC ID number of contributing federal political committee. Name of Employer ACCREDO HEALTH GROUP Receipt For: Primary General Other (specify)	State TN C Occupation VP SALE		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional))	292.30

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 186 (check only one)	
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH			Date of Receipt	
Mailing Address 87 ROSELAWN R	D		03 28 2009	
City HIGHLAND MILLS	State NY	Zip Code 10930	Transaction ID: INC.A.61856 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 ▼ 1344.00		
Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA	I		Date of Receipt	
	Mailing Address 112 GREEN TERRACE WAY			
City WEST MILFORD	State NJ	Zip Code 07480	Transaction ID: INC.A.61984 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	07400	192.31	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUS	n SINESS OPS		
Receipt For: Primary General Other (specify) ▼	· · · · · · · · · · · · · · · · ·	Year-to-Date ▼ 1346.17		
Full Name (Last, First, Middle Initial) DAVID MILLER			Date of Receipt	
Mailing Address 7 CLOVER LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.61650	
FEC ID number of contributing federal political committee.	C	07003	Amount of Each Receipt this Period 50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABC	n DR RELATIONS		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00		
SUBTOTAL of Receipts This Page (option	al)		434.31	

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
1	information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F			on for the purpose of soliciting contributions solicit contributions from such committee.
A. M.	Full Name (Last, First, Middle Initial) MRS KAREN MILLER Mailing Address 34 MACKENZIE LANE DENVILLE FEC ID number of contributing ederal political committee. Jame of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupation EXEC DI	Zip Code 07834 on IR INTERNAL AUDIT e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y O 3 28 2009 Transaction ID: INC.A.61643 Amount of Each Receipt this Period 50.00
B. M.	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY Mailing Address 86 WELLINGTON AVE City SHORT HILLS FEC ID number of contributing ederal political committee. Mame of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupatio GENL C-	Zip Code 07078 n -SEC-SVP PHARM STRAT Se Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y O 3
C. M	Full Name (Last, First, Middle Initial) MS THERESA MORMILE Mailing Address 59 VALLEY VIEW TER City MONTVALE FEC ID number of contributing ederal political committee. Jame of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State NJ C Occupatio VP FINA		Date of Receipt M M M / D D / Y Y Y Y Y Y O 3 28 2009 Transaction ID: INC.A.61945 Amount of Each Receipt this Period 50.00
	BTOTAL of Receipts This Page (optional) TAL This Period (last page this line number		•	292.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ROBERT MULLER			Date of Receipt
	Mailing Address 69 FERN PLACE			03 / 28 / 2009
	City <u>PARAMUS</u>	State NJ	Zip Code 07652	Transaction ID: INC.A.61955 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 HLTI	on H BUS CLIENT ENROLLMN	<u></u>
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) MS BECKY NAGLE	1		Date of Receipt
	Mailing Address 64 WALTER AVE			03 28 2009
	City HASBROUCK HEIGHTS	State NJ	Zip Code	Transaction ID: INC.A.61692
	FEC ID number of contributing federal political committee.	C	07604	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIN	on IICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
с. С.	Full Name (Last, First, Middle Initial) MS ARLENE NELSON			Date of Receipt
	Mailing Address 319 BOGERT AVENU	JE		M M / D D / Y Y Y Y Y Y Y Y Y Y Z Z O O 9
	City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.61729 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07400	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			150.00
	TOTAL This Period (last page this line numbe	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 134 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN			Date of Receipt
	Mailing Address 45 DAVIS ROAD			03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61800
	SPARTA FEC ID number of contributing	NJ	07871	Amount of Each Receipt this Period
	federal political committee.	C		38.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLI	n NICAL THERAPEUTICS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		266.00]
В.	Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER			Date of Receipt
	Mailing Address 6 PARK DR SOUTH			03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61967
	RYE	NY	10580	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		350.00	
_ С.	Full Name (Last, First, Middle Initial) MR MELVIN OHL			Date of Receipt
	Mailing Address 274 E FRANKLIN TP	ΚE		03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61917
	RIDGEWOOD FEC ID number of contributing	NJ	07450	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	n CUREMENT & INVENTORY	,
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
	SUBTOTAL of Receipts This Page (optional) .		_\	138.00
上	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to c. POLITICAL ACTION COMMITTEE (a.k.a	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS SUE OLIVER Mailing Address 11 LEE DRIVE City NORTH HALEDON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07508 C Occupation EXEC DIR TECHNOLOGY Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D M / 2 8
Full Name (Last, First, Middle Initial) MS LUDIVINA PACAMARRA Mailing Address 4 TEAK COURT City RINGWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07456 C Occupation EXEC DIR TECHNOLOGY Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS DAWN PAGANO Mailing Address 185 PASCACK ROA City PARK RIDGE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07656 C Occupation GROUP COO Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE Mailing Address 12 MILLBROOK COUF	OT.		Date of Receipt
	City	State	Zip Code	0 3 2 8 2 0 0 9 Transaction ID: INC.A.61819
	LIVINGSTON	NJ	07039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP RETI	n REE SOLUTIONS MKTG	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 385.00	
- В.	Full Name (Last, First, Middle Initial) MRS CATHY PATTEN			Date of Receipt
	Mailing Address 2001 MEADOWS AVE	03 28 2009		
	City	State	Zip Code	Transaction ID: INC.A.61869
	LANTANA FEC ID number of contributing federal political committee.	C	76226	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
- С.	Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS			Date of Receipt
	Mailing Address 2780 FOLKSTONE RC	AD		03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61703
	COLUMBUS FEC ID number of contributing federal political committee.	OH C	43220	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)			105.00
-	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 11
0	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	on for the purpose of soliciting contributions solicit contributions from such committee.
\ \ .	Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI Mailing Address 211 WILTSIE COURT		`	Date of Receipt 0 3 2 8 2 0 0 9
	City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.61781 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	_	on D TECHNOLOGY e Year-to-Date ▼ 210.00	
	Full Name (Last, First, Middle Initial) MERRI PENDERGRASS, MD Mailing Address 3201 QUEENSBURY V	VAY WEST		Date of Receipt 0 3 2 8 2 0 0 9
	City	State	Zip Code	Transaction ID: INC.A.62098
	COLLEYVILLE FEC ID number of contributing federal political committee.	C	76034	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATI	n ONAL PRACTICE LEADER	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) JIMMY PERREN			Date of Receipt
	Mailing Address 1250 BRAY PARK DR	EAST		03 28 2009
	City COLLIERVILLE	State TN	Zip Code 38017	Transaction ID: INC.A.62111 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer ACCREDO HEALTH GROUP	_1	ULATORY COMPLIANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional)			155.00
Γ.	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 138 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions 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)
Α.	Full Name (Last, First, Middle Initial) MR THOMAS PETTYES Mailing Address 8522 UPLAND LN NO	NDTU		Date of Receipt
		/n I I I		03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61749
	MAPLE GROVE	MN	55311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENER/	on AL MGR GROUP	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
_ В.	Full Name (Last, First, Middle Initial) MR THOMAS PIERCE			Date of Receipt
	Mailing Address 10297 E. LAKE DR.			03 / 28 / 2009
	City	State	Zip Code	Transaction ID: INC.A.62070
	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	_, -	OR RELATIONS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify)		350.00	
c. –	Full Name (Last, First, Middle Initial) MS JUDITH PLATKIN	<u>'</u>		Date of Receipt
	Mailing Address 29 BLACKWELL AVE			03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61645
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	on GENERAL MGR	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		1346.10	
	SUBTOTAL of Receipts This Page (optional) .			292.30
	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 139 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) MR NEIL PREZIOSO Mailing Address 10258 WINDSOR WA' City POWELL	Y State OH	Zip Code 43065	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.	C	45065	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		on H CARE OPS/FORMULARY/ De Year-to-Date ■ 350.00	CDP
- В.	Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE Mailing Address 875 ALEXANDRIA CT			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.61838
	RAMSEY FEC ID number of contributing federal political committee.	C	07446	Amount of Each Receipt this Period 192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP HR	on	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1346.10	
- C.	Full Name (Last, First, Middle Initial) MR MARK PROULX Mailing Address 20 BRANDY RIDGE R	OAD		Date of Receipt
	City	State	Zip Code	0 3 2 8 2 0 0 9 Transaction ID: INC.A.62006
	<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	Occupation SVP PH	ⁱⁿ ARMACY & CUST SVC OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
	SUBTOTAL of Receipts This Page (optional)			434.61
	TOTAL This Period (last page this line number	only)		

ITEMIZED RECEIPTS	ν)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 186 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
Mailing Address 800 SANDY TRAIL	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City KELLER	State TX	Zip Code	Transaction ID: INC.A.62026
FEC ID number of contributing federal political committee.	C	76248	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) MS FRANCES RAO			Date of Receipt
Mailing Address 19 ROSS ROAD			03 28 2009
City SCARSDALE	State NY	Zip Code 10583	Transaction ID: INC.A.61672 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R REGULATORY	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) MRS MONICA REED			Date of Receipt
Mailing Address 8475 DUNHAM STA	ATION DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.61833 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33047	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n RM PRACTICE	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optiona	J)		125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 186 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P			
Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS		,	Date of Receipt
Mailing Address 43 HAROLD ST. UNIT B			03 / 28 / 2009
City	State	Zip Code	Transaction ID: INC.A.61766
COS COB	CT	06807	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 RECONCILIATION	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR VICTOR RENNA			Date of Receipt
Mailing Address 8 CARLA ANN CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.61970
<u>FLANDERS</u>	NJ	07836	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 PROC	CUREMENT & INVENTORY	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS			Date of Receipt
Mailing Address 412 RIVER MEWS LAN	NE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.62023
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 EXEC DI	R TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 490.00	
SUBTOTAL of Receipts This Page (optional)			170.00

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 142 / 186 (check only one) X 11a
\ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO	-		Date of Receipt
	Mailing Address 96 LEHMANN STREE	:I		03 / 28 / 2009
	City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.61764 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07430	192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRESID	on ENT SYSTEMED	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.10	
— В.	Full Name (Last, First, Middle Initial) MS DONNA ROSEN Mailing Address 7 DED OAK LANE			Date of Receipt
	Mailing Address 7 RED OAK LANE			03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61934
	KINNELON FEC ID number of contributing federal political committee.	NJ C	07405	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	on -CLINICAL TECH	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
_ C.	Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS			Date of Receipt
	Mailing Address 7227 RAMOTH DRIVI	Ξ		03 28 2009
	City JACKSONVILLE	State FL	Zip Code	Transaction ID: INC.A.61734
	FEC ID number of contributing federal political committee.	C	32226	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR CLINICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			292.30
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143/186 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RICHARD RUBINO			Date of Receipt
Mailing Address 3 APACHE DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.61931
OAKLAND FEC ID number of contributing federal political committee.	NJ C	07436	Amount of Each Receipt this Period 193.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP FIN	n ANCE & CHIEF FIN OFFCR	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1351.00	
Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK			Date of Receipt
Mailing Address 21 SKY TOP RIDGI	E		03 28 2009
City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.61783 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07400	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio VP CLIN	n ICAL MGMT & SVCS	
Receipt For: Primary General Other (specify) ▼	- + +	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS KATHERYN RUSSI			Date of Receipt
Mailing Address 5965 VILLAGE CIR	CLE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City JOHNSTON	State IA	Zip Code	Transaction ID: INC.A.61681
FEC ID number of contributing federal political committee.	C	50131	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n R CLINICAL SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	l)		293.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 186 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements made and add	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.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JESSE RUZICKA			Date of Receipt
Mailing Address 334 MORRIS AVE			03 / 28 / 2009
City	State	Zip Code	Transaction ID: INC.A.62043
BOONTON	NJ	07005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio NATL AC	n CCT EXEC	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		210.00	
Full Name (Last, First, Middle Initial) MS MARY RYAN	-		Date of Receipt
Mailing Address 456 RICHMOND AVE	NUE		03 / 28 / 2009
City	State	Zip Code	Transaction ID: INC.A.61924
MAPLEWOOD	NJ	07040	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		78.34
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PHAI	n RMACY REGULATORY	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 548.38	
Full Name (Last, First, Middle Initial) MR DAVID SCHLETT			Date of Receipt
Mailing Address 339 GRAMERCY PL			03 28 2009
City	State	Zip Code	Transaction ID: INC.A.61930
GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP FIN	n ANCIAL & ANALYTICAL SV	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		350.00	
SUBTOTAL of Receipts This Page (optional) .			158.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 186 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to committee. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ Mailing Address 9111 N KARLOV City SKOKIE	State Zip Code IL 60076	Date of Receipt M M M / D D D / Y Y Y Y Y O 3 28 2009 Transaction ID: INC.A.61704 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date 350.00	50.00
Full Name (Last, First, Middle Initial) BRUCE SCOTT Mailing Address 18650 BEARPATH City	TRAIL State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
EDEN PRAIRIE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	MN 55347 C Occupation	Amount of Each Receipt this Period 192.31
Receipt For: Primary General Other (specify) ▼	SVP & CHIEF PHARMACIST Aggregate Year-to-Date ▼ 1346.17	
Full Name (Last, First, Middle Initial) MS CYNTHIA SCOTT Mailing Address 18650 BEARPATH	TRAIL	Date of Receipt 0 3 2 8 2 0 0 9
City EDEN PRAIRIE FEC ID number of contributing federal political committee.	State Zip Code MN 55437	Transaction ID: INC.A.61648 Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary Other (specify) ▼	Occupation VP CLINICAL PROG DEV Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	0 0 0 0 0 0 0 0	292.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 186 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee t	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT Mailing Address 7330 EVEREST LAN City MAPLE GROVE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State MN C	Zip Code 55311	Date of Receipt 0 3
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE Mailing Address 3021 E MILLCREEK	ROAD		Date of Receipt O 3
City	State	Zip Code	Transaction ID: INC.A.61640
SALT LAKE CITY FEC ID number of contributing federal political committee.	C	84109	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		R CLINICAL SVCS Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV			Date of Receipt
Mailing Address 66 PROSPECT AVE			03 / 28 / 2009
City WESTWOOD	State NJ	Zip Code 07675	Transaction ID: INC.A.61995 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	01013	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS DEV	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)			150.00

SCHEDULE A (F ITEMIZED RECE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 186 (check only one) X
Any information copied from or for commercial purposes NAME OF COMMITTE	s, other than using the name an	s may not be sold or used by any person d address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH S	OLUTIONS INC. POLITIC	AL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, MR THOMAS SHANAHA			Date of Receipt
			03 28 2009
City LAS VEGAS	Stat NV	te Zip Code 89148	Transaction ID: INC.A.61854 Amount of Each Receipt this Period
FEC ID number of cont federal political committee	ributing	00170	60.00
Name of Employer MEDCO HEALTH SOI	UTIONS Occu	pation GM	
Receipt For: Primary Other (specify)	General	egate Year-to-Date ▼ 780.00	
Full Name (Last, First, MR JOHN SHEA	Middle Initial)		Date of Receipt
Mailing Address 62 F	FRANKLIN TURNPIKE	03 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	Stat	te Zip Code	Transaction ID: INC.A.61657
ALLENDALE	NJ	07401	Amount of Each Receipt this Period
FEC ID number of cont federal political committ			40.00
Name of Employer MEDCO HEALTH SOI	LUTIONS Occu ASS	pation T COUNSEL	
Receipt For: Primary Other (specify) ▼	General	egate Year-to-Date ▼ 280.00]
Full Name (Last, First, MR FRANK SHEEHY	Middle Initial)		Date of Receipt
Mailing Address 119	HAMILTON RD		03 28 2009
City	Stat	te Zip Code	Transaction ID: INC.A.61722
RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
FEC ID number of cont federal political committ			50.00
Name of Employer MEDCO HEALTH SOI	LITIONS	pation & GENERAL MGR	
Receipt For: Primary Other (specify)	General	egate Year-to-Date ▼ 700.00	
SUBTOTAL of Receipts	This Page (optional)		150.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) MR PETER SHERMAN Mailing Address 139 GATES AVENUE City	State	Zip Code	Date of Receipt 0 3 2 8 2 0 0 9 Transaction ID: INC.A.61633
	MONTCLAIR FEC ID number of contributing federal political committee.	NJ	07042	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		ING COUNSEL e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) JEFFREY SIMEK Mailing Address 704 SAW PALMETTO	COURT		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.61829
	PORT ORANGE	FL	32128	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 COR	n P COMMUNICATIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
с.	Full Name (Last, First, Middle Initial) MR LEE SIMON			Date of Receipt
О.	Mailing Address 2390 GREENVIEW RO	OAD		03 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State IL	Zip Code	Transaction ID: INC.A.61979
	NORTHBROOK FEC ID number of contributing federal political committee.	C	60062	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n AL MGR GROUP	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			292.31
ļ	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 149 / 186 (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	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JEFFREY SINKO			Date of Receipt
	Mailing Address 10 CHERRY TREE LA			03 28 2009
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.61863 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 G	on ENERAL COUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00]
В.	Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO Mailing Address 564 DALE COURT EA	ST		Date of Receipt
			7:n Oada	03 28 2009
	City RIVER VALE	State NJ	Zip Code 07675	Transaction ID: INC.A.61673 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
С. С.	Full Name (Last, First, Middle Initial) MR ROBERT SMITH			Date of Receipt
	Mailing Address 40 JOSHUA DR T			03 28 2009
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.61952 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 700.00	
	SUBTOTAL of Receipts This Page (optional)			130.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 186 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR			Date of Receipt
	Mailing Address 23 CEDAR GATE RO	AD		03 28 7 2009
	City DARIEN	State CT	Zip Code 06820	Transaction ID: INC.A.62014 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHAIRM	on IAN & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	
В.	Full Name (Last, First, Middle Initial) MR ALAN SOKALER Meiling Address 200 MIGUELLE WAY			Date of Receipt
	Mailing Address 30 MICHELLE WAY			03 28 2009
	City PINE BROOK	State NJ	Zip Code 07058	Transaction ID: INC.A.62044 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07000	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
с.	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE	_		Date of Receipt
	Mailing Address 6108 HUNTER LANE			03 28 2009
	City COLLEYVILLE	State TX	Zip Code 76034	Transaction ID: INC.A.61878 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70007	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For: Primary General Other (specify) ▼	++	e Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional) .			267.31
	TOTAL This Period (last page this line number		<u> </u>	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 186 (check only one) X
A o	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) PETER STARK Mailing Address 4840 COLE ROAD			Date of Receipt 0 3
	City MEMPHIS	State TN	Zip Code 38117	Transaction ID: INC.A.62132 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	n VP MANUF SVCS	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
_	Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN Mailing Address 7 FOREST LAKE DR	l		Date of Receipt
	Mailing Address 7 FOREST LAKE DR			03 28 2009
	City WEST HARRISON	State NY	Zip Code 10604	Transaction ID: INC.A.61932
	FEC ID number of contributing federal political committee.	C	10004	Amount of Each Receipt this Period 192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINA	1 ANCIAL & ANALYTICAL SV	/C
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1346.17	
_	Full Name (Last, First, Middle Initial) MS JILL STEARNS			Date of Receipt
	Mailing Address 13130 HALSELL DR			03 28 2009
	City AUSTIN	State TX	Zip Code 78732	Transaction ID: INC.A.61982
	FEC ID number of contributing federal political committee.	C	70732	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	ACCT EXEC	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Γ,	SUBTOTAL of Receipts This Page (optional)			292.31

ITEMIZED RE	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152/186 (check only one)
Any information copi or for commercial pu	ed from such Reports and S rposes, other than using the	Statements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMM MEDCO HEAL	, ,	POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, MS AMY STEINKE	First, Middle Initial) ELLNER			Date of Receipt
Mailing Address	1740 HIGHLAND DRIV	VΕ		03 28 2009
City ELM GROVE		State WI	Zip Code 53122	Transaction ID: INC.A.61798 Amount of Each Receipt this Period
FEC ID number of federal political co		C	30122	50.00
Name of Employe MEDCO HEALT	r H SOLUTIONS	Occupatio VP NATI	n ONAL PRACTICE LEADER	
Receipt For: Primary Other (spec	General ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, DR GLEN STETT	First, Middle Initial) N			Date of Receipt
	8 MILL GLEN CT			03 28 7 2009
City UPPER SADD	I E RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.62000 Amount of Each Receipt this Period
FEC ID number of federal political co	f contributing	C	07430	192.31
Name of Employe MEDCO HEALT	r H SOLUTIONS	Occupatio SVP/GM	n ADVANCED CLINICAL SLT	
Receipt For: Primary Other (spec	General ▼	. '	e Year-to-Date ▼ 1346.17	
Full Name (Last, MR GERARD STO	First, Middle Initial)	1		Date of Receipt
	80 ALGONQUIN TRL			03 28 2009
City OAKLAND		State NJ	Zip Code	Transaction ID: INC.A.61756
FEC ID number of federal political co		C	07436	Amount of Each Receipt this Period 50.00
Name of Employe MEDCO HEALT	r H SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
Receipt For: Primary Other (spec	General ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Rec	eipts This Page (optional)	1		292.31

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 186 (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 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 SCOTT STRATTON	\ (F		Date of Receipt
	Mailing Address 351 TIMBERLANE DRI City	VE State	Zip Code	0 3 2 8 2 0 0 9 Transaction ID: INC.A.62050
	ORANGE	CT	06477	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	n DUCT DEVELOPMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) MS SUZANNE STREDNAK Mailing Address 157 WATCHILING DR			Date of Receipt
	Mailing Address 157 WATCHUNG DR			03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61710
	HAWTHORNE	NJ	07506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CLINICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
с. С.	Full Name (Last, First, Middle Initial) MILAYNA SUBAR, MD			Date of Receipt
	Mailing Address 11 RIVERSIDE DRIVE #8CE			03 / 28 / 4 9 9
	City NEW YORK	State NY	Zip Code 10023	Transaction ID: INC.A.62096
	FEC ID number of contributing federal political committee.	C	10025	Amount of Each Receipt this Period 30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATI	n ONAL PRACTICE LEADER	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		210.00	
	SUBTOTAL of Receipts This Page (optional)			130.00
	TOTAL This Period (last page this line number of		·	

ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154 / 186 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any 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	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MARK SULLIVAN			Date of Receipt
Mailing Address 16025 PINE VALE	PL.		03 / 28 / Y Y Y Y Y Y
City MIDLOTHIAN	State VA	Zip Code 23113	Transaction ID: INC.A.61654 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20110	40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CS 5	n SYSTEMS PLAN & IMPLEM	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) MS IRENE SUTTON			Date of Receipt
Mailing Address 20 AVENUE @ PO APT 209	RT IMPERIAL		03 / 28 / 2009
City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC.A.61726 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3,000	40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 1	TECHNOLOGY	7
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	1
Full Name (Last, First, Middle Initial)			
MR TIMOTHY SWETT Mailing Address 8362 GOLDEN PRA	AIRIE DRIVE		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.61763
FEC ID number of contributing federal political committee.	C	33047	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	7
Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optiona	J)		130.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 186 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MARY THORSBY Mailing Address 17326 ELLEN DR	Chata	7'o Oode	Date of Receipt 0 3 28 2009
City LIVONIA FEC ID number of contributing federal political committee.	State MI	Zip Code 48152	Transaction ID: INC.A.61779 Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	- ' '	ACCT EXEC Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN Mailing Address 838 COLONIAL RI	D		Date of Receipt 0 3 2 8 2 0 0 9
City	State	Zip Code	Transaction ID: INC.A.61665
FRANKLIN LAKES FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENE	n EFIT SYSTEMS SUPPORT	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER			Date of Receipt
Mailing Address 713 INDIAN CREE	K RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City AMHERST	State VA	Zip Code 24521	Transaction ID: INC.A.61860
FEC ID number of contributing federal political committee.	C	24321	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n GOVERNMENT AFFAIRS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	
SUBTOTAL of Receipts This Page (options	al)		200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156 / 186 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	
` '	. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GARY TULLY	20.45	Date of Receipt
Mailing Address 16 FIELDHEDGE DF City	State Zip Code	0 3 2 8 2 0 0 9 Transaction ID: INC.A.61987
HILLSBOROUGH	NJ 08844	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 CLIENT SVC DELIVERY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) MR JEFFREY TYLER		Date of Receipt
Mailing Address 37 KNOLL TERRAC	E	03 / 28 / 2009
City	State Zip Code	Transaction ID: INC.A.61825
HAZLET	NJ 07730	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.77
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	215.39	
Full Name (Last, First, Middle Initial) MS CARA VAN ZILE		Date of Receipt
Mailing Address 31 LINCOLN RD		03 28 7 2009
City KINNELON	State Zip Code NJ 07405	Transaction ID: INC.A.61774
FEC ID number of contributing federal political committee.	NJ 07405	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR ANALYTICAL SVCS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
		110.77

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	ly 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.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA			Date of Receipt
	Mailing Address W328 S4230 SPRING	RIDGE		03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.62105
	WAUKESHA FEC ID number of contributing federal political committee.	C	53189	Amount of Each Receipt this Period 100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & C	on BENERAL MGR	
	Receipt For: Primary General		e Year-to-Date ▼	
	Other (specify)		700.00	
В.	Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS			Date of Receipt
	Mailing Address 105 ARRANDALE RD			03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61852
	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 MKT		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		350.00	
с. С.	Full Name (Last, First, Middle Initial) MR WIL VELARDE			Date of Receipt
	Mailing Address 443 WEST SADDLE F	RIVER RD		03 28 2009
	City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.61724 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	TECHNOLOGY	
	Receipt For: Primary General Other (specify)	Aggregati	e Year-to-Date ▼ 210.00	
	SUBTOTAL of Receipts This Page (optional) .			180.00
Ī	TOTAL This Period (last page this line number	only)		

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 186 (check only one) X
or for	nformation copied from such Reports and commercial purposes, other than using the AME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
) N	IEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
. <u>M</u>	ull Name (Last, First, Middle Initial) R DANIEL WALDEN			Date of Receipt
	ailing Address 450 BEECHMONT DF			03 28 2009
	ity IEW ROCHELLE	State NY	Zip Code 10804	Transaction ID: INC.A.61910 Amount of Each Receipt this Period
F	EC ID number of contributing deral political committee.	С		192.31
N: M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio SVP RE0	n GULATORY & MC PROGRA	AMS
R	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1346.17	
	ull Name (Last, First, Middle Initial) R WILLIAM WALLACE			Date of Receipt
М	ailing Address 5445 GOODWIN AVE		03 28 2009	
	ity	State	Zip Code	Transaction ID: INC.A.62035
_	ALLAS	TX	75206	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		192.31
N: M	ame of Employer IEDCO HEALTH SOLUTIONS	Occupatio VP SALE	n ES SEGMENT LEADER	
R	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1346.17	
	ull Name (Last, First, Middle Initial) R CALVIN WASDYKE			Date of Receipt
M	ailing Address 5 APPLE ORCHARD	RD		03 28 2009
	ity MOODESTOWN	State	Zip Code	Transaction ID: INC.A.61865
FI	MOORESTOWN EC ID number of contributing deral political committee.	NJ C	08057	Amount of Each Receipt this Period 50.00
N: M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
R	eceipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 650.00	
CIIE	STOTAL of Receipts This Page (optional) .	1		434.62

ITEMIZED RECEIP	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 186 (check only one)
Any information copied from su or for commercial purposes, ot	uch Reports and Statements ma her than using the name and ad	ly 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 (I MEDCO HEALTH SOL	,	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Midd MS CATHERINE WASSON	,		Date of Receipt
Mailing Address 3912 C	ALLE ANDALUCIA		03 28 2009
City	State	Zip Code	Transaction ID: INC.A.61668
SAN CLEMENTE	CA	92673	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	ting		50.00
Name of Employer MEDCO HEALTH SOLUT	Occupation VP NAT	on L ACCTS	
Receipt For: Primary Ger Other (specify) ▼	Aggregat	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Midd MRS KELLY WEBBER	lle Initial)		Date of Receipt
Mailing Address 107 UP	PER SADDLE RIVER ROA		03 / 28 / 1 2009
City	State	Zip Code	Transaction ID: INC.A.61845
MONTVALE	NJ	07645	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	° C		100.00
Name of Employer MEDCO HEALTH SOLUT	Occupation VP COR		
Receipt For: Primary Ger Other (specify) ▼	Aggregate Aggregate	e Year-to-Date ▼ 700.00	
Full Name (Last, First, Midd LOWELL WEINER	lle Initial)		Date of Receipt
Mailing Address 1 BURG	GESS COURT		03 28 7 9 9
City	State	Zip Code	Transaction ID: INC.A.62077
WESTFIELD	NJ	07090	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	ting		50.00
Name of Employer MEDCO HEALTH SOLUT		RP COMMUNICATIONS	
Receipt For: Primary Ger	Aggregate neral	e Year-to-Date ▼	
Other (specify)	ICI CII	350.00	
			200.00

ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 186 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH			Date of Receipt
Mailing Address 309 WATERVIEW	DR		03 28 2009
City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.61746 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07417	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	n PRES EMPLOYER GROUP	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1346.17	
Full Name (Last, First, Middle Initial) MR KENNETH WERMES			Date of Receipt
Mailing Address 26037 N WRANGL	0 3 28 2009		
City SCOTTSDALE	State AZ	Zip Code 85255	Transaction ID: INC.A.61835
FEC ID number of contributing federal political committee.	C	60200	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON			Date of Receipt
Mailing Address 2 TIFFANY ROAD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.61809
FEC ID number of contributing federal political committee.	C	07900	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTI		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (options	al)		317.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 186 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to see POLITICAL ACTION COMMITTEE (a.k.a.	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN Mailing Address 145 WAUGHAW ROA City TOWACO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 07082 C Occupation SVP FINANCIAL & ANALYTICAL SVC Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D D / Y Y Y Y Y 2 8 / 2 0 0 9 Transaction ID: INC.A.61758 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH Mailing Address 43 AZALEA PLACE City PISCATAWAY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NJ 08854 C Occupation SR DIR RRA Aggregate Year-to-Date 210.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS ANNA WONG Mailing Address 64-20 BELL BLVD City BAYSIDE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State Zip Code NY 11364 C Occupation VP INSURED SOLUTIONS Aggregate Year-to-Date 350.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) .	<u> </u>	130.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 186 (check only one) X
0	ny information copied from such Reports and r 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 persod dress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) BRENDA WRIGHT Mailing Address 1834 HUNTERS CRE	EK DDIVE		Date of Receipt
	Walling Address 1834 HUNTERS CRE	EK DRIVE		03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.62120
	GERMANTOWN	TN	38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP QUA	n LITY INTEGRITY HEALTH	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	350.00	
	Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR	1		Date of Receipt
	Mailing Address 219 SPOOK ROCK R	D.		03 28 2009
	City	State	Zip Code	Transaction ID: INC.A.61892
	SUFFERN	NY	10901	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 E-CC	DM DEV	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		350.00	
	Full Name (Last, First, Middle Initial) ANDREA ZICCARELLI			Date of Receipt
	Mailing Address 6550 HERONWOOD	DR		03 / 28 / 2009
	City	State	Zip Code	Transaction ID: INC.A.61735
	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	- '	L ACCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		350.00	
Γ	SUBTOTAL of Receipts This Page (optional).			150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 186 (check only one) X 11a
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITIC	CAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI Mailing Address 6691 DEERVIEW DRIVE City Stat	te Zip Code	Date of Receipt 0 3
LOVELAND OH	•	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25.00
Name of Employer MEDCO HEALTH SOLUTIONS Occu VP/0	ipation GM	
Primary General Other (specify)	regate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	•	25.00
TOTAL This Period (last page this line number only)	•	33213.48

SCHEDULE B (FEC Form 3X)		R LINE NUMBER: PAGE 164 / 186
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	eck only one) 21b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITIONS	FICAL ACTION COMMITTEE (a.	a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) NIELSEN, MERKSAMER, PARRINELLO, Mailing Address 1415 L STREET, STE. 12	· · · · · · · · · · · · · · · · · · ·	Transaction ID: EXP.B.60511 Date of Disbursement O 3
	State Zip Code CA 95814	Amount of Each Disbursement this Period 818.82
Candidate Name	Categor Type	ory/
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	
State: District:		

CURTOTAL of Diskurserserts This Days (antique)		818.82
SUBTOTAL of Disbursements This Page (optional)		010.02
TOTAL This Period (last page this line number only)	•	818.82

		Use separate schedule(s	()	_	eck only	NUMBE one)	٠			17	- C	165 /	100
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		À	21b 27	22 28a	X	23 28b		24 28c	\perp	25 29	26 30
	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 politica	al com	mitt	ee to sol	icit contr	ibuti	ons fr	om s				
V \ .	Full Name (Last, First, Middle Initial) ADLER FOR CONGRESS Mailing Address 14 KNIGHTSWOOD DR	VE				Trans Date						040 0 0 9	Y
	MÁRLTON	State Zip Code NJ 08053				Amou	nt of	Each	n Disk	ourse	-	this P	
	Purpose of Disbursement Candidate Name ADLER FOR CONGRESS		Ca	01 ⁻ ateg Typ	ory/		•	•	•		100	00.00	٥
	X	ment For: 2010 Primary General Other (specify)	•										
3.	Full Name (Last, First, Middle Initial) CONGRESSIONAL BLACK CAUCUS PAC Mailing Address 227 MASSACHUSETTS					Trans Date			emer)39 0 0 9	Υ
	City WASHINGTON Purpose of Disbursement	State Zip Code DC 20002		01		Amou	nt of	Each	n Disk	ourse		this P	
	Candidate Name CONGRESSIONAL BLACK CAUCUS PAC Office Sought: House Senate President	(CBC PAC) ment For: Primary General Other (specify)	Ca	ateg Typ	ory/								
 }.	State: District: Full Name (Last, First, Middle Initial) CONGRESSMAN WAXMAN CAMPAIGN (COMMITTEE				Trans Date		sburs	emer				V
	Mailing Address 6380 WILSHIRE BLVD.,	STE. 1612 State Zip Code				0 3			1 3	/ L		0 ŏ 9	
	City LOS ANGELES	1			Amou	nt of	Each	n Disk	ourse		this P		
	Purpose of Disbursement Candidate Name CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE			01 ⁻ ateg Typ	ory/		•					00.00	
		ment For: 2010 Primary General Other (specify)	1										
	I						-						-

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 166 / 186
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
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 COMMI	TTEE (a.k.a. M	Medco Health PAC)
Full Name (Last, First, Middle Initial) FRIENDS OF SHERROD BROWN			Transaction ID: EXP.B.61042 Date of Disbursement
Mailing Address PO BOX 76187			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 3 \end{smallmatrix} \end{bmatrix} \ \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & O \\ I & I & I & I \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
City WASHINGTON	State Zip Code DC 20013		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name FRIENDS OF SHERROD BROWN		Category/ Type	
X Senate President	oursement For: 2012 X Primary General Other (specify)		
State: OH District: Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.61043
MIKULSKI FOR SENATE COMMITTE	E		Date of Disbursement
Mailing Address P.O. BOX 13147			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ I & O & O & 9 \end{bmatrix}$
City BALTIMORE	State Zip Code MD 21203		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name MIKULSKI FOR SENATE COMMITTE	E	Category/ Type	
Office Sought: House X Senate President	oursement For: 2010 X Primary General Other (specify)		
State: MD District: Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.61060
CANTOR FOR CONGRESS			Date of Disbursement
Mailing Address P. O. BOX 17813			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & Y \\ I & O & O & 9 \end{bmatrix}$
City RICHMOND	State Zip Code VA 23226		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2500.00
Candidate Name CANTOR FOR CONGRESS		Category/ Type	
Senate President	oursement For: 2010 X Primary General Other (specify)	71.2	
State: VA District: 07			
SUBTOTAL of Disbursements This Page (option	nal)	>	4500.00
TOTAL This Period (last page this line number	only)		

SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)		NUMBER: PAGE 167 / 186
TEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 27	7 one) 22 X 23 24 25 2 28a 28b 28c 29 3
Any Information copied from such Reports and Sor for commercial purposes, other than using the				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.				
Full Name (Last, First, Middle Initial) CROWLEY FOR CONGRESS				Transaction ID: EXP.B.61059 Date of Disbursement
Mailing Address 84-56 GRAND AVE				03
City ELMHURST	State NY	Zip Code 11373		Amount of Each Disbursement this Period
Purpose of Disbursement			011	1000.00
Candidate Name CROWLEY FOR CONGRESS	sbursement For:	2010	Category/ Type	
Office Sought: X House Senate President State: NY District: 07	X Primary Other (spe	General		
Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN				Transaction ID: EXP.B.61058 Date of Disbursement
Mailing Address P.O. BOX 3197				$\begin{bmatrix}\begin{smallmatrix}M\\03\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\18\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}D\\18\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\2009\end{smallmatrix}\end{bmatrix}^Y$
City LITTLE ROCK	State AR	Zip Code 72203		Amount of Each Disbursement this Period
Purpose of Disbursement			011	2500.00
Candidate Name FRIENDS OF BLANCHE LINCOLN			Category/ Type	
χ Senate President	sbursement For: X Primary Other (spe	2010 General		
State: AR District: Full Name (Last, First, Middle Initial)				Transaction ID: EXP.B.61061
PEOPLE FOR ENTERPRISE TRADE	AND ECONOI	MIC GROWTH		Date of Disbursement Max
Mailing Address 7804 EVENING LAN	NE			03 18 2009
City ALEXANDRIA	State VA	Zip Code 22306		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name	AND FOOT		011 Category/	5000.00
	AND FCONOI	MIC GROWTH	Туре	
PEOPLE FOR ENTERPRISE TRADE	sbursement For: Primary Other (spe	General ecify) ▼		
PEOPLE FOR ENTERPRISE TRADE Office Sought: House Dis Senate	sbursement For:			

SCHEDIII E B (FEC Form 3Y)

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check onl	NUMBER: PAGE 168 / 186
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30k
	ny Information copied from such Reports and Stater for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMI	TTEE (a.k.a. N	Medco Health PAC)
A .	Full Name (Last, First, Middle Initial) LANCE FOR CONGRESS			Transaction ID: EXP.B.61100 Date of Disbursement 0 3
	Mailing Address P.O. BOX 225			03 20 2009
	City COLONIA	State Zip Code NJ 07067		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	2000.00
	Candidate Name LANCE FOR CONGRESS		Category/ Type	
	X III	ement For: 2010 Primary General Other (specify)		
_	Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.61621
3.	FRELINGHUYSEN FOR CONGRESS			Date of Disbursement
	Mailing Address 19 CATTANO AVE.			$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} 0 & 3 & 1 \\ 0 & 3 & 1 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 1 \\ 0 & 2 & 0 & 0 & 9 \end{bmatrix}$
	City MORRISTOWN	State Zip Code NJ 07960		Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name FRELINGHUYSEN FOR CONGRESS		011 Category/	1000.00
	Office Sought: X House Disburs	ement For: 2010 Primary General Other (specify)	Туре	
 C.	Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER			Transaction ID: EXP.B.61622 Date of Disbursement
	Mailing Address 509 MADISON AVE., ST	TE. 1902		$ \begin{bmatrix} M & M \\ 0 & 3 \end{bmatrix} \begin{bmatrix} M & 2 & 0 & 0 & 0 \\ 0 & 3 & 1 \end{bmatrix} \begin{bmatrix} M & 2 & 0 & 0 & 0 & 0 \\ 0 & 3 & 0 & 0 & 0 & 0 \end{bmatrix} $
	City NEW YORK	State Zip Code NY 10022		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	2000.00
	Candidate Name FRIENDS OF SCHUMER		Category/ Type	
	X Senate X President	ement For: 2010 Primary General Other (specify)		
	State: NY District:			5000.00
	SUBTOTAL of Disbursements This Page (optional)			
⊺	OTAL This Period (last page this line number only)	<u>)</u>	.	29000.00

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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28a 28b 28c X 29
	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 politica	l committee to s	olicit contributions from such committee
<u>v </u>	Full Name (Last, First, Middle Initial) CITIZENS FOR AMSTUTZ COMMITTEE Mailing Address 1169 NORTH CROWNH	ILL ROAD		Transaction ID: EXP.B.61052 Date of Disbursement 0 3 7 7 2 0 0 9
	ORRVILLE	State Zip Code OH 44667	Γ	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Candidate Name CITIZENS FOR AMSTUTZ COMMITTEE		011 Category/ Type	300.00
		ement For: 2010 Primary General Other (specify)		
	Full Name (Last, First, Middle Initial) CITIZENS FOR WAGONER			Transaction ID: EXP.B.61051 Date of Disbursement
	Mailing Address 7445 AIRPORT HIGHWA	ΥΥ		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City HOLLAND	State Zip Code OH 43528		Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name CITIZENS FOR WAGONER		011 Category/ Type	500.00
	Office Sought: House Disburse	ment For: 2012 Primary General Other (specify)	1,750	
	Full Name (Last, First, Middle Initial) CITIZENS TO ELECT DAN DODD			Transaction ID: EXP.B.61057 Date of Disbursement
	Mailing Address 106 N. MAIN STREET			$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 7 \\ 1 & 7 \end{bmatrix} / \begin{bmatrix} 1 & 2 & 2 & 0 & 0 \\ 2 & 2 & 0 & 0 & 9 \end{bmatrix}$
		State Zip Code		Amount of Each Disbursement this Period
	City NEW LEXINGTON	OH 43765		
	NÉW LEXINGTON Purpose of Disbursement		011 Category/	500.00
	NÉW LEXINGTON Purpose of Disbursement Candidate Name CITIZENS TO ELECT DAN DODD	OH 43765	011 Category/ Type	500.00
	NÉW LEXINGTON Purpose of Disbursement Candidate Name CITIZENS TO ELECT DAN DODD Office Sought: House Disburse		Category/	500.00

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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c X 29 3
	y Information copied from such Reports and State or commercial purposes, other than using the na			
	NAME OF COMMITTEE (In Full)	ne and address of any pointear		Sicil contributions from such committee
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL ACTION COMMIT	TTEE (a.k.a.	Medco Health PAC)
	Full Name (Last, First, Middle Initial) CITIZENS TO ELECT JOHN PATRICK C	ARNEY		Transaction ID: EXP.B.61056 Date of Disbursement
	Mailing Address 357 E. TORRENCE RC	AD		0 3 7 7 7 2 0 0 9
	City COLUMBUS	State Zip Code OH 43214		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name CITIZENS TO ELECT JOHN PATRICK C	ARNEY	Category/ Type	
	9 🗎	sement For: 2010 ⟨ Primary General Other (specify) ▼		
	State: OH District:			
	Full Name (Last, First, Middle Initial) COMMITTEE FOR JIM HUGHES			Transaction ID: EXP.B.61049 Date of Disbursement
	Mailing Address 14 E. GAY STREET, 2	ID FLOOR		$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 7 \\ 0 & 1 & 7 \end{bmatrix} / \begin{bmatrix} y & y & 0 & y & y \\ 2 & 0 & 0 & 9 & y \end{bmatrix}$
	City COLUMBUS	State Zip Code OH 43215		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name COMMITTEE FOR JIM HUGHES		Category/ Type	
	Senate President	sement For: 2012 Primary General Other (specify)		
	State: OH District: Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOYD			Transaction ID: EXP.B.61053 Date of Disbursement
	Mailing Address 3623 CUMMINGS ROA	D		$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{bmatrix}$
	City CLEVELAND	State Zip Code OH 44118		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name FRIENDS OF BARBARA BOYD		Category/ Type	
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	State: OH District:			

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					for the purpose of soliciting contribution licit contributions from such committee	
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Full Name (Last, First, M FRIENDS OF GARY	,				Transaction ID: EXP.B.61047 Date of Disbursement	V
Mailing Address 654	2 SEMINOLE DRIVE				03	9
City WEST CHESTER		State OH	Zip Code 45069		Amount of Each Disbursement this 500.0	
Purpose of Disbursemen	t 			011	300.0	JO
Candidate Name FRIENDS OF GARY				Category/ Type		
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Full Name (Last, First, M FRIENDS OF SENAT	,				Transaction ID: EXP.B.61046 Date of Disbursement	
Mailing Address 600	WARNER ROAD				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ I & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & O & O \end{smallmatrix}$	9
City HUBBARD		State OH	Zip Code 44425		Amount of Each Disbursement this	Perio
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HOUSE DEMOCRAT					Transaction ID: EXP.B.61045 Date of Disbursement	V
Mailing Address 340	E. FULTON STREE	Т			$ \begin{bmatrix} M & M \\ 0 & 3 \end{bmatrix} \begin{bmatrix} & D & D \\ 0 & 1 & 7 \end{bmatrix} \begin{bmatrix} & Y & Y & Y & Y \\ 2 & 0 & 0 \end{bmatrix} $	9 1
City COLUMBUS		State OH	Zip Code 43215		Amount of Each Disbursement this	Perio
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		(>p	<i>→</i>			
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NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	· · ·		
A. Full Name (Last, First, Middle Initial) KAREN GILLMOR FOR OHIO Mailing Address P.O. BOX 278			Transaction ID: EXP.B.61048 Date of Disbursement
City TIFFEN	State Zip Code OH 44883		Amount of Each Disbursement this Period
Purpose of Disbursement		011	500.00
Candidate Name KAREN GILLMOR FOR OHIO	L	Category/ Type	
Office Sought: House Disbution Senate President State: OH District:	x Primary Quencily Qu		
Full Name (Last, First, Middle Initial) B. OHIO DEMOCRATIC PARTY			Transaction ID: EXP.B.61044 Date of Disbursement
Mailing Address 340 E. FULTON STR	ET		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & Y & Y \\ 2 & O & O & 9 \end{smallmatrix} \end{bmatrix}$
City COLUMBUS	State Zip Code OH 43215		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name OHIO DEMOCRATIC PARTY	[011 Category/ Type	5000.00
Office Sought: House Disbution Senate President State: OH District:	rsement For: Primary General Other (specify)	.,,,,,	
Full Name (Last, First, Middle Initial) C. SEITZ FOR SENATE SEAT			Transaction ID: EXP.B.61050 Date of Disbursement
Mailing Address 4401 ABBY COURT			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & T \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & 9 \end{smallmatrix} \end{bmatrix} $
City CINCINNATI	State Zip Code OH 45248		Amount of Each Disbursement this Period
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Candidate Name SEITZ FOR SENATE SEAT		Category/ Type	
Office Sought: House Disbution Senate President State: OH District:	x Primary Qeneral Other (specify)		
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NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) TEAM BURKE		Transaction ID: EXP.B.61055 Date of Disbursement 0 3
Mailing Address 275 W. 4TH STREET		0 3 1 7 7 2 0 0 9
City MARYSVILLE	State Zip Code OH 43040	Amount of Each Disbursement this Period
Purpose of Disbursement	01	300.00
Candidate Name TEAM BURKE	Categ Typ	
	sement For: 2010 X Primary General Other (specify)	
Full Name (Last, First, Middle Initial) BARBARA BUONO FOR SENATE		Transaction ID: EXP.B.61065 Date of Disbursement
Mailing Address 75 WOODBRIDGE AV	≣.	0 3 1 9 7 2 0 0 9
City METUCHEN	State Zip Code NJ 08840	Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name BARBARA BUONO FOR SENATE	01 Categ Typ	1 gory/
	sement For: 2011 X Primary General Other (specify)	
Full Name (Last, First, Middle Initial) BOB GORDON FOR SENATE		Transaction ID: EXP.B.61069 Date of Disbursement
Mailing Address 654 PLAZA ROAD NO	RTH	03 19 2009
City FAIRLAWN	State Zip Code NJ 07410	Amount of Each Disbursement this Period
Purpose of Disbursement	01	500.00
Candidate Name BOB GORDON FOR SENATE	Categ Typ	gory/
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MEDCO HEALTH SOLUTIONS INC. F	POLITICAL AC	TION COMMI ⁻	TTE	E (a	a.k.a. M	ledco H	leal	th PA	C)			
Full Name (Last, First, Middle Initial) BONNIE WATSON COLEMAN FOR A	SSEMBLY							on ID:	EXP ement	.B.61	083	
Mailing Address 132 SANHICAN DR						0 ^M 3	М	^D 1	9 /	Y	0 0 9	Y
City TRENTON	State NJ	Zip Code 08618				Amou	nt of	Each	Disbur	semer	t this F	eriod
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BONNIE WATSON COLEMAN FOR A				Тур	Э							
Office Sought: House Dist Senate President State: NJ District:	oursement For: X Primary Other (spec	2009 General cify)										
Full Name (Last, First, Middle Initial)						_					205	
COMMITTEE TO ELECT L. GRACE S	PENCER					Date of		on ID: sburse	EXP ement			Υ
Mailing Address 33 MORRSE AVE.						0 3		1		2	0 0 9	
City ORANGE	State NJ	Zip Code 07017				Amou	nt of	Each	Disbur			-
Purpose of Disbursement				01			0			, ,	500.00)
Candidate Name COMMITTEE TO ELECT L. GRACE S	PENCER		Ca	uteg Typ	ory/							
Office Sought: House Disl Senate President State: NJ District:	oursement For: X Primary Other (spec	2009 General										
Full Name (Last, First, Middle Initial) CONAWAY FOR ASSEMBLY						Trans Date of		-	EXP ement	.B.61	082	
Mailing Address 907 MORGAN AVE						0 ^M 3	M	^D 1	9 /	YZ	0 ŏ 9	Y
City PALMYRA	State NJ	Zip Code 08065				Amou	nt of	Each	Disbur	semer	t this F	eriod
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To reach category of the Detailed Summary Page 21b		Use separate schedul	e(s) (check onl	NUMBER: PAGE 175 / 186
NAME OF COMMITTEE (in Full) NAME OF COMMITTEE (in Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) CONNERS FOR ASSEMBLY Mailing Address 907 MORGAN AVE. City PALMYRA NJ 08065 Purpose of Disbursement Candidate Name CONNERS FOR ASSEMBLY Office Sought: House Summit Ny Category/ Type Disbursement Disbursement Other (specify) ▼ Transaction ID: EXP.B.61084 Date of Disbursement this Perio Amount of Each Disbursement this Perio Transaction ID: EXP.B.61094 Date of Disbursement this Perio Transaction ID: EXP.B.61090 Date of Disbursement this Perio Transaction ID: EXP.B.61090 Date of Disbursement Other (specify) ▼ Transaction ID: EXP.B.61090 Date of Disbursement Other (specify) ▼ Transaction ID: EXP.B.61090 Date of Disbursement Other (specify) ▼ Transaction ID: EXP.B.61090 Date of Disbursement Other (specify) ▼ Transaction ID: EXP.B.61090 Date of Disbursement Other (specify) ▼ Transaction ID: EXP.B.61090 Date of Disbursement Other (specify) ▼ Transaction ID: EXP.B.61090 Date of Disbursement this Perio Transaction ID: EXP.B.61090 Date of Disbursement this Perio Other (specify) ▼ Transaction ID: EXP.B.61090 Date of Disbursement this Perio Transaction ID: EXP.B.61090 Date of Disbursement this Perio Other (specify) ▼ Transaction ID: EXP.B.61090 Date of Disbursement this Perio Transaction ID: EXP.B.61096 Date of Disbursement this Perio Transaction ID: EXP.B.61096 Date of Disbursement this Perio Transaction ID: EXP.B.61096 Date of Disbursement this Perio Transaction ID: EXP.B.61096 Date of Disbursement this Perio Transaction ID: EXP.B.61096 Date of Disbursement this Perio Transaction ID: EXP.B.61090 Date of Disbursement this Perio Transaction ID: EXP.B.61090 Date of Disbursement this Perio Transaction ID: EXP.B.61090 Date of Disbursement this Perio Transaction ID: EXP.B.61090 Date of Disbursement this Perio Transaction ID: EXP.B.61090 Date of Disbursement this Perio Transaction ID: EXP.B.61090 Date of Disb	TEMIZED DISBURSEMENTS	Detailed Summary Pa	ge 21b 27	22 23 24 25 28a 28b 28c X 29
MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) CONNERS FOR ASSEMBLY Mailing Address 907 MORGAN AVE. City PALMYRA Office Sought: Full Name (Last, First, Middle Initial) DR. ERIC MUNOZ FOR ASSEMBLY City State Zip Code President State: NJ District: Full Name (Last, First, Middle Initial) Purpose of Disbursement Candidate Name Converted to the first principle of the first princ				
CONNERS FOR ASSEMBLY Mailing Address 907 MORGAN AVE. City PALMYRA Purpose of Disbursement Candidate Name CONNERS FOR ASSEMBLY Office Sought: House Senate President State: NJ District: City SUMMIT Purpose of Disbursement Candidate Name Conty SUMMIT Candidate Name Conty SUMMIT Candidate Name Conty SUMMIT Candidate Name Conty Summe Candidate Name Disbursement For: 2009 Suntate: NJ District: City SUMMIT NJ District: City SUMMIT NJ District: City SUMMIT NJ District: Candidate Name Disbursement Conty Summe Disbursement Conty Summe Candidate Name Disbursement Disbursement Disbursement Disbursement Candidate Name Disbursement Disbursement Disbursement Disbursement Disbursement Other (specify) Transaction ID: EXP.B.61090 Date of Disbursement Disbu	` '	DLITICAL ACTION COM	MITTEE (a.k.a. I	Medco Health PAC)
City State: NJ District: Full Name (Last, First, Middle Initial) Candidate Name CRANIDATE NAME City State: NJ Disbursement City SUMMIT Candidate Name CRANIDATE NAME CRANIDATE NAME CITY Senate Senate NJ O7901 Purpose of Disbursement City SUMMIT NJ 07901 Purpose of Disbursement Candidate Name DR. ERIC MUNOZ FOR ASSEMBLY Office Sought: House President State: NJ District: City SUMMIT NJ 07901 Purpose of Disbursement Candidate Name DR. ERIC MUNOZ FOR ASSEMBLY Office Sought: House President State: NJ District: Full Name (Last, First, Middle Initial) ELECTION FUND OF ALEX DECROCE Mailing Address 101 GIBRALTAR DR. City MORRIS PLAINS NJ 07950 Purpose of Disbursement Candidate Name ELECTION FUND OF ALEX DECROCE Office Sought: House President City State Zip Code NJ 07950 Amount of Each Disbursement this Perio Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** 2 0 0 9 ** Amount of Each Disbursement this Perio Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** 2 0 0 9 ** Amount of Each Disbursement this Perio Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** 2 0 0 9 ** Amount of Each Disbursement this Perio Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** 2 0 0 9 ** Amount of Each Disbursement this Perio Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** 2 0 0 9 ** Amount of Each Disbursement this Perio Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** 2 0 0 9 ** Amount of Each Disbursement this Perio Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** 2 0 0 9 ** Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** 2 0 0 9 ** Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** 2 0 0 9 ** Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** 1 9 ** Transaction ID: EXP.B.61086 Date of Disbursement Of 3 ** Transaction ID: EXP.B.6	•			Date of Disbursement
PALMYRA NJ 08065 Purpose of Disbursement Candidate Name CONNERS FOR ASSEMBLY Office Sought: House Senate President State: NJ District: Full Name (Last, First, Middle Initial) DR. ERIC MUNOZ FOR ASSEMBLY City Summing Address 121 OAK RIDGE AVE. City Summing Address 121 OAK RIDGE AVE. City Senate President DR. ERIC MUNOZ FOR ASSEMBLY Office Sought: House Senate NJ District: Full Name (Last, First, Middle Initial) DR. EXP.B.61090 Date of Disbursement Other (specify) ▼ Transaction ID: EXP.B.61090 Date of Disbursement Other (specify) ▼ Amount of Each Disbursement this Perior Senate President Senate President Senate Senate Senate Senate Senate Senate Other (specify) ▼ Transaction ID: EXP.B.61090 Date of Disbursement this Perior Senate Senate Senate Other (specify) ▼ Transaction ID: EXP.B.61090 Amount of Each Disbursement this Perior Senate Disbursement For: 2009 Amount of Each Disbursement Transaction ID: EXP.B.61086 Date of Disbursement Other (specify) ▼ Transaction ID: EXP.B.61086 Date of Disbursement Date of Disbursement Transaction ID: EXP.B.61086 Date of Disbursement Date of Disbursement Transaction ID: EXP.B.61086 Date of Disbursement Date of Disbursement Transaction ID: EXP.B.61086 Date of Disbursement Date of Disbursement Transaction ID: EXP.B.61086 Date of Disbursement Date of Disbursement Transaction ID: EXP.B.61086 Date of Disbursement Date of Disbursement Transaction ID: EXP.B.61086 Date of Disbursement Date of Disbursement Transaction ID: EXP.B.61086 Date of Disbursement Date of Disbursement Transaction ID: EXP.B.61090 Amount of Each Disbursement Transaction ID: EXP.B.61090 Transaction ID: EXP.B.61090 Amount of Each Disbursement Transaction ID: EXP.B.61090 Transaction ID: EXP.B.61090 Amount of Each Disbursement Transaction ID: EXP.B.61090 Transaction ID: EXP.B.61090 Transaction ID: EXP.B.61090 Amount of Each Disbursement Transaction ID: EXP.B.61090 Transaction ID: EXP.B.61090 Transaction ID: EXP.B.61090 Transaction ID: EXP.B.61090 Transaction ID: EXP.B.61090 Transaction	Mailing Address 907 MORGAN AVE.			0 3 1 9 7 2 0 0 9
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ELECTION FUND OF RICHARD J. CODEY Office Sought: Senate President Disbursement For: X Primary General Other (specify) ▼	Purpose of Disbursement				1250.00
Senate X Primary General President Other (specify) ▼		ODEY			
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	ELECTION FUND OF RICHARD J. CO Office Sought: House Dist Senate	bursement For:	General		

П		Use separate schedule(S) I (cho	R LINE NUMBER: PAGE 1/9/1 eck only one)
_	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	, 2	21b 22 23 24 25 27 28a 28b 28c X 29
	y Information copied from such Reports and Statem for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	e and address of any politic	al committee	ee to solicit contributions from such committee
<u>v_</u>	Full Name (Last, First, Middle Initial) ELECTION FUND OF ROBERT W. SINGE Mailing Address 3 NORTH DAKOTA CT.	ER		Transaction ID: EXP.B.61076 Date of Disbursement
	JACKSON	State Zip Code NJ 08527	1	Amount of Each Disbursement this Pe
	Purpose of Disbursement Candidate Name ELECTION FUND OF ROBERT W. SINGE	 ER	011 Categor Type	ory/
		ement For: 2011 Primary Genera Other (specify)	l	
	Full Name (Last, First, Middle Initial) ELECTION FUND OF SENATOR RAYMOND J. LESNIAK			Transaction ID: EXP.B.61071 Date of Disbursement M M / D D / Y Y Y O Y O Y O Y O Y O O O O O O O O
	Mailing Address 530 IRVINGTON AVE.			03 19 2009
	,	State Zip Code NJ 07208		Amount of Each Disbursement this Pe
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	9 🗎 –	ement For: 2011 Primary Genera Other (specify)	l	
	Full Name (Last, First, Middle Initial) FRIENDS OF ASSEMBLY SPEAKER JOE ROBERTS			Transaction ID: EXP.B.61093 Date of Disbursement
	FRIENDS OF ASSEMBLY SPEAKER JOE	HODEITIO		M M / D D / V V V
	FRIENDS OF ASSEMBLY SPEAKER JOE Mailing Address P.O. BOX 1362			03
	Mailing Address P.O. BOX 1362 City	State Zip Code NJ 08099		Amount of Each Disbursement this Pe
	Mailing Address P.O. BOX 1362 City BELLMAWR Purpose of Disbursement	State Zip Code	011 Category	Amount of Each Disbursement this Pe
	Mailing Address P.O. BOX 1362 City BELLMAWR Purpose of Disbursement Candidate Name FRIENDS OF ASSEMBLY SPEAKER JOE	State Zip Code NJ 08099 ROBERTS	011 Categor Type	Amount of Each Disbursement this Pe
	Mailing Address P.O. BOX 1362 City BELLMAWR Purpose of Disbursement Candidate Name FRIENDS OF ASSEMBLY SPEAKER JOE Office Sought: House Disburse	State Zip Code NJ 08099	Categor Type	Amount of Each Disbursement this Pe

SCHEDOLL B (I LO I OHII SX)	Use separate schedule(s) (check or	E NUMBER: PAGE 180 / 186		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	I	22 23 24 25 26 28a 28b 28c X 29 30		
Any Information copied from such Reports and State or for commercial purposes, other than using the result of the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Policy of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of the Name of State of State of the Name of State of the Name of State of State of the Name of State of the Name of State of St	ame and address of any politic	al committee to s	solicit contributions from such committee		
Full Name (Last, First, Middle Initial) FRIENDS OF BILL BARONI Mailing Address 370 TALL TREE CT.			Transaction ID: EXP.B.61064 Date of Disbursement O 3 M / D D D / Y Y Y O O 9		
City JACKSON Purpose of Disbursement	State Zip Code NJ 08527	T	Amount of Each Disbursement this Period 500.00		
Candidate Name FRIENDS OF BILL BARONI		011 Category/ Type			
Office Sought: House Disbuter Senate President State: NJ District:	xrsement For: 2011 X Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) FRIENDS OF CONNIE WAGNER Mailing Address 45 ESSEX ST., SUITI	FRIENDS OF CONNIE WAGNER				
City HACKENSACK Purpose of Disbursement	State Zip Code NJ 07601		Amount of Each Disbursement this Period 500.00		
Candidate Name FRIENDS OF CONNIE WAGNER		O11 Category/ Type			
Office Sought: House Senate President State: NJ District:	x Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) FRIENDS OF DIANE ALLEN	,				
Mailing Address 650 MYRTLE AVE.	Mailing Address 650 MYRTLE AVE.				
City THORFARE	State Zip Code NJ 08086		Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Candidate Name FRIENDS OF DIANE ALLEN		011 Category/ Type	300.00		
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Office Sought: House Disbuter Senate President State: NJ District:	X Primary Genera Other (specify) ▼				

SCHEDOLL D (I LC I OHII SX	Use separate schedule(s	(check onl	v one)	_ P	AGE 181 /	186
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		22 28a	23 24 28b 28c	25 X 29	2 3
Any Information copied from such Reports and or for commercial purposes, other than using the		ed by any person	for the purpos	e of soliciting of	contributions	
NAME OF COMMITTEE (In Full)	le name and address of any pointe	ai committee to so	onen continuati	ons nom such	COMMINICE	
MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMM	ITTEE (a.k.a. l	Medco Heal	th PAC)		
Full Name (Last, First, Middle Initial) FRIENDS OF RONALD L RICE SEN	IATE CAMPAIGN COMMITTE	E		on ID: EXP. sbursement	B.61073	
Mailing Address P.O. BOX 20037			03	19 /	Ý Ž0 Ŏ 9	Y
City NEWARK	State Zip Code NJ 07101		Amount of	Each Disburs		-
Purpose of Disbursement		011			500.00)
Candidate Name FRIENDS OF RONALD L RICE SEN		Category/ E Type				
Office Sought: House Senate President State: NJ District:	isbursement For: 2011 X Primary General Other (specify)					
Full Name (Last, First, Middle Initial)						
Mailing Address 706 HOLLY CT.	Mailing Address 706 HOLLY CT.					Y
City NORWOOD	State Zip Code NJ 07648		Amount of	Each Disburs		
Purpose of Disbursement		011	L		500.00)
	Candidate Name FRIENDS OF SENATOR CARDINALE					
Office Sought: House Senate President State: NJ District:	isbursement For: 2011 X Primary General Other (specify)					
Full Name (Last, First, Middle Initial) JERRY GREEN FOR ASSEMBLY	Full Name (Last, First, Middle Initial)					
Mailing Address 1460 PROSPECT	Mailing Address 1460 PROSPECT AVE				Ý 2009	Y
City PLAINFIELD	State Zip Code NJ 07060		Amount of	Each Disburs	ement this F	eriod
Purpose of Disbursement					500.00)
Candidate Name JERRY GREEN FOR ASSEMBLY		Category/ Type				
Senate President	isbursement For: 2009 X Primary General Other (specify) ▼					
State: NJ District:						
SUBTOTAL of Disbursements This Page (op	tional)	<u> </u>			1500.00) —
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SCHEDULE B (FEC FOIIII 3X)		Use separate schedule(s)	()	FOR LINE NUMBER: PAGE (check only one)					GE 18	182 / 186	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		$\dot{\Box}$	21b 27	22 28a	23 28	b 🗖	24 28c	25 X 29	
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam										
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL										
<u></u>	Full Name (Last, First, Middle Initial) KEAN FOR SENATE Mailing Address P.O. BOX 425					Date	action of Disbu			61070 Ž 0 č	
	City	State Zip Code				Amou	nt of Ea	ch Dis	bursen	nent thi	s Period
	WESTFIELD Purpose of Disbursement	NJ 07091	Γ		_					750.	.00
	Candidate Name KEAN FOR SENATE		1	01 ⁻ ateg	ory/						
		ement For: 2011 Primary General Other (specify)									
	Full Name (Last, First, Middle Initial) LORETTA WEINBERG FOR SENATE					Date	action of Disbu	ırseme			
	Mailing Address P.O. BOX 3392					0 3	M /	19	/ Y	ž 0 č	9
	City TEANECK	State Zip Code NJ 07666				Amou	nt of Ea	ch Dis	bursen	nent thi	s Period
	Purpose of Disbursement Candidate Name LORETTA WEINBERG FOR SENATE				ory/					500.	.00
	Office Sought: House Disburs	ement For: 2011 Primary General Other (specify)	<u> </u>	Тур	3						
	Full Name (Last, First, Middle Initial) LOUIS D. GREENWALD FOR ASSEMBLY					Date	action of Disbu	ırseme	nt		
	Mailing Address 2240-15 RT. 70					0 3	M /	19	/ Y	žoč	9
	City CHERRY HILL	State Zip Code NJ 08002				Amou	nt of Ea	ch Dis	bursen	nent thi	s Period
	Purpose of Disbursement			01		L.				750.	.00
	Candidate Name LOUIS D. GREENWALD FOR ASSEMBL	Y		ateg Typ							
	Senate X President	ement For: 2009 Primary General Other (specify)	•								
_	State: NJ District:					_					

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	S) (check	NUMBER: PAGE 183 / 186		
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21 27	28a 28b 28c X 29		
	y Information copied from such Reports and State for commercial purposes, other than using the na					
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL ACTION COM	ИІТТЕЕ (a.k	.a. Medco Health PAC)		
<u>v </u>	Full Name (Last, First, Middle Initial) NEW JOBS Mailing Address PO BOX 1600			Transaction ID: EXP.B.61062 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Trenton	State Zip Code NJ 08607		Amount of Each Disbursement this Period		
	Purpose of Disbursement		011	5000.00		
	Candidate Name NEW JOBS		Category Type			
	Senate President	sement For: Primary Genera Other (specify) ▼	il			
	State: NJ District: Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.61091		
	POU FOR ASSEMBLY			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address P.O. BOX 2696			03 19 2009		
	City PATERSON	State Zip Code NJ 07509	_	Amount of Each Disbursement this Period		
	Purpose of Disbursement		011	1000.00		
	Candidate Name POU FOR ASSEMBLY		Category, Type			
	9 🗎	sement For: 2009 X Primary Genera Other (specify) ▼	al			
	Full Name (Last, First, Middle Initial) SCHAER NJ ASSEMBLY			Transaction ID: EXP.B.61094 Date of Disbursement		
	Mailing Address P.O. BOX 5045			03		
	City PASSAIC	State Zip Code NJ 07055		Amount of Each Disbursement this Period		
	Purpose of Disbursement		011	1000.00		
	Candidate Name SCHAER NJ ASSEMBLY		Category, Type			
	9 🗎	sement For: 2009 X Primary General Other (specify)	1			
	State: NJ District:	(1 3/ V				

SCHEDIII E B (FEC Form 3Y)

	CHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINE (check only	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30
	ny Information copied from such Reports and State for commercial purposes, other than using the nan			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMI	TTEE (a.k.a. M	Medco Health PAC)
·	Full Name (Last, First, Middle Initial) STEVE SWEENEY FOR SENATE			Transaction ID: EXP.B.61099 Date of Disbursement
	Mailing Address 300 MARION AVE		$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Y \\ 2 & 0 & 0 & 9 \end{bmatrix}$	
	City WENONAH	State Zip Code NJ 08090		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	1000.00
	Candidate Name STEVE SWEENEY FOR SENATE		Category/ Type	
		ement For: 2011 Primary General Other (specify)		
	Full Name (Last, First, Middle Initial) VANDREW FOR SENATE			Transaction ID: EXP.B.61078 Date of Disbursement
	Mailing Address P.O. BOX 941			03
	City CAPE MAY COURT HOU	State Zip Code NJ 08210		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name VANDREW FOR SENATE		Category/ Type	
		ement For: 2011 Primary General Other (specify)		
	Full Name (Last, First, Middle Initial) VITALE FOR SENATE			Transaction ID: EXP.B.61079 Date of Disbursement
	Mailing Address P.O. BOX 1467			03
	City WOODBRIDGE	State Zip Code NJ 07095		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	1000.00
	Candidate Name VITALE FOR SENATE		Category/ Type	
		ement For: 2011 Primary General Other (specify)		
	SUBTOTAL of Disbursements This Page (optional)			2500.00
	OTAL This Period (last page this line number only			
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: (check only one)	PAGE 185 / 186			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22 23 27 28a 28				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	,		· ·			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITIONS	TICAL ACTION COMMITTE	EE (a.k.a. Medco Health	PAC)			
Full Name (Last, First, Middle Initial) WHELAN FOR SENATE Mailing Address P.O. BOX 362		Transaction Date of Disb	D: EXP.B.61081 ursement			
7	State Zip Code NJ 08225	Amount of E	ach Disbursement this Period			
Purpose of Disbursement Candidate Name WHELAN FOR SENATE	C	011 ategory/	500.00			
Office Sought: House Disburse Senate X President	ment For: 2011 Primary General Other (specify)	Туре				
State: N.I. District:						

SUBTOTAL of Disbursements This Page (optional)	•	500.00
TOTAL This Period (last page this line number only)	<u> </u>	44300.00

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line) PAGE 186 / 186

9

FOR LINE NUMBER: (check only one)

Excluding Loans

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMITTE	EE (a.k.a. Medco Health	n PAC)
		1	
A. Full Name (Last, First, Middle Initial)			Pebt (Purpose):
NIELSEN, MERKSAMER, PARRIN	NELLO, MUELLER, & NAYLOR,	LLP LEGAL &	ACCOUNTING FEES
Mailing Address 1415 L STREET, S	CTE 1200		
Walling Address 1413 L STREET, S	51E. 1200		
City State	ZIP Code		
SACRAMENTO CA	95814		
Outstanding Balance Beginning This	Pariod	Tro	nsaction ID: PAY:D:59971
	- Criod	IIa	ilsaction ib. 1 A1.D.33971
818.82			
Amount Incurred This Period	Payment This Pe	riod Outstandi	ng Balance at Close of This Period
0.00		318.82	0.00
0.00		310.02	0.00
B. Full Name (Last, First, Middle Initial)	of Dobtor or Craditor	Noture of D	leht (Burnaga):
NIELSEN, MERKSAMER, PARRIN		IIP IFGAL &	lebt (Purpose): ACCOUNTING SERVIC-
	vees, more en a rour est,	ES ES	7.0000.11.11.00.02.11.110
Mailing Address 1415 L STREET, S	STE. 1200		
, ,			
City State	ZIP Code		
SACRAMENTO CA	95814		
Outstanding Balance Beginning This	Period	Tra	nsaction ID: PAY:D:62171
0.00			
Amount Incurred This Period	Payment This Pe	riod Outstandi	ng Balance at Close of This Period
1162.00		0.00	1162.00
C. Full Name (Last, First, Middle Initial)	of Debtor or Creditor	Nature of D	ebt (Purpose):
NIELSEN, MERKSAMER, PARRIN	NELLO, MUELLER, & NAYLOR,	LLP LEGAL &	ACCOUNTING SERVIC-
		E3	
Mailing Address 1415 L STREET, S	STE. 1200		
City State	ZIP Code		
SACRAMENTO CA	95814		
		_	
Outstanding Balance Beginning This	renou	Tra	nsaction ID: PAY:D:62172
0.00			
Amount Incurred This Period	Payment This Pe	riod Outstandi	ng Balance at Close of This Period
40.00		0.00	40.00
1) SUBTOTALS This Period This Page (ontional\	•	1202.00
i) 300101ALS This Period This Page (புயபாவர்		
2) TOTALS This Period (last page this line	e number only)		1202.00
,			
3) TOTAL OUTSTANDING LOANS fro	m Schedule C (last page only)	>	0.00
-			
4) ADD 2) and 3) and carry forward to ap	propriate line of Summary Page (last page)	age only)	1202.00