07/20/2006 12:36

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) 591 REDWOOD HWY., #4000 ADDRESS (number and street) Check if different than previously MILL VALLEY CA 94941 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE A CITY A IS THIS **AMENDED** NEW C00384362 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 06 0 1 2006 06 30 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. JASON D. KAUNE Type or Print Name of Treasurer JASON D. KAUNE Electronically Filed by 07 19 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

eport Covering the Period: From:	01 2006	To: 0 6 3 0 2 0 0 0
-	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1		225102.30
(b) Cash on Hand at Begining of Reporting Period	263636.80	
(c) Total Receipts (from Line 19)	33035.47	233434.97
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	296672.27	458537.27
Total Disbursements (from Line 31)	110111.04	271976.04
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	186561.23	186561.23
Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	11 02	2 0 0 4 CA

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. 02/2003) Page 3

Write or Type Committee Name

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

0 1 3^D0 м ₀ 2006 0 6 2006 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 30382.46 183469.86 (i) Itemized (use Schedule A) 2554.04 49467.43 (ii) Unitemized (iii) TOTAL (add 32936.50 232937.29 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 32936.50 232937.29 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 0.00 Political Committees 17. Other Federal Receipts 98.97 497.68 (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), 33035.47 233434.97 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 33035.47 233434.97 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

(i) Federal Share.....

(ii) Non-Federal Share.....

Expenditures.....

Committees.....

Federal Candidates/Committees.....and Other Political Committees.....

26. Loan Repayments Made.....

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

(d) Total Contribution Refunds

29. Other Disbursements.....

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

(i) Federal Share

(ii) "Levin" Share (b) Federal Election Activity Paid Entirely

With Federal Funds (c) Total Federal Election Activity (add

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

32. Total Federal Disbursements

from Line 31).....

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

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

Lines 30(a)(i), 30(a)(ii) and 30(b))....

(from Schedule H6)

Than Political Committees

(such as PACs)

II. DISBURSEMENTS

(a) Shared Federal/Non-Federal Activity (from Schedule H4)

(b) Other Federal Operating

22. Transfers to Affiliated/Other Party

Contributions to

24. Independent Expenditure

27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other

23.

(c) Total Operating Expenditures

21. Operating Expenditures:

of Disbursements Page 4 **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date 0.00 0.00 0.00 0.00 2061.04 2326.04 2061.04 2326.04 (add 21(a)(i), (a)(ii) and (b))............ 0.00 0.00 42000.00 145500.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 (add Lines 28(a), (b), and (c)) 66050.00 124150.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 110111.04 271976.04

110111.04

271976.04

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)	32936.50	232937.29
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	32936.50	232937.29
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2061.04	2326.04
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	2061.04	2326.04

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 220
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
-	-		Detailed Summary Page	13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the nan	ments may	r not be sold or used by any persol lress of any political committee to	for the purpose of soliciting contributions
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	MEDCO HEALTH SOLUTIONS INC. POL	ITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) DAVID BAUGH			Date of Receipt
	Mailing Address 1813 ADONIS AVE			06 03 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24655
	HENDERSON FEC ID number of contributing	NV	89074	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	MEDCO HEALTH SOLLITIONS	Occupation MGR BEI	NEFIT DELIVERY SYSTEMS	3
		Aggregate	Year-to-Date ▼	1
	Primary ☐ General Other (specify) ▼		580.00	
3.	Full Name (Last, First, Middle Initial) KENNETH DANIELS			Date of Receipt
	Mailing Address 2903 CHUKKAR COURT			06 03 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24534
	PLANT CITY	FL	33567	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	MEDOO HE'XI TH SOLLITIONS	Occupatior VP/GM	1	
		Aggregate	Year-to-Date ▼	1
	Primary General Other (specify) ▼		625.00	
	Full Name (Last, First, Middle Initial) ROBBIN DICESARE			Date of Receipt
	Mailing Address 1003T HIGH STREET			06 03 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24571
	BURLINGTON TOWNSHI	NJ	08016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		9.28
	MEDOO HE'ALTH SOLLITIONS	Occupation SR MGR	TECHNOLOGY	
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		232.00	
_ s	UBTOTAL of Receipts This Page (optional)		_	59.28
	,			
Т	OTAL This Period (last page this line number only	<i>ı</i>)	>	

0	CHEDIII E A /EEC Earm 2V)			FOR LINE NUMBER: PAGE 7 / 220
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Δr	y information copied from such Reports and Sta	atomonte may	y not be sold or used by any perso	
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	CTION COMMITTEE (a k a	Medco Health PAC)
	MEDGO HEXETT GOLOTTONO INC. 1	5 E 1 1 1 0 7 1 E 7	.011011 001111111 122 (a.i.i.	ii Modes Health Frey
_	Full Name (Last, First, Middle Initial)			
A.	WILLIS DINGLE			Date of Receipt
	Mailing Address 17826 ARBOR GREEN	E DR		M M / D D / Y Y Y Y
	011	01-1-	7'- 0-4-	06 03 2006
	City	State	Zip Code	Transaction ID: INC:A:24422
	TAMPA	<u>FL</u>	33647	Amount of Each Receipt this Period
	FEC ID number of contributing	C		25.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	┥
	MEDCO HEALTH SOLUTIONS	SR DIR	I R	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General			1
	Other (specify)		625.00	
				*
	Full Name (Last, First, Middle Initial)			
В.	GEORGIA EDDLEMAN			Date of Receipt
	Mailing Address 908 EDGEMEER LANE	06 03 2006		
	City	State	Zip Code	Transaction ID: INC:A:24639
	SOUTHLAKE	TX	76092	
		1/	70092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		34.45
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	
		VP/GM		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	, ,	861.25	
	Other (specify)	0 0		1
_	Full Name (Last, First, Middle Initial)			
C.	JOSEPH FRENDO			Date of Receipt
	Mailing Address 9 GREEN HILL TRAIL			M M / D D / Y Y Y Y
				06 03 2006
	City	State	Zip Code	Transaction ID: INC:A:24540
	TROPHY CLUB	TX	76262	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		50.00
	Name of Employer	Occupation	1	\dashv
	Name of Employer MEDCO HEALTH SOLUTIONS	VP/GM	•	
	Receipt For:		Year-to-Date ▼	_
	Primary General	33 -9-10		1
	Other (specify) ▼	1	1250.00	
				*
s	UBTOTAL of Receipts This Page (optional)			109.45
F	1			_

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 220 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) RICHARD JONES			Date of Receipt
	Mailing Address 12 WADE HAMPTON TR		7:01	06 03 2006
	City HENDERSON	State NV	Zip Code 89052	Transaction ID: INC:A:24595 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.08
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	ı	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 377.00	
В.	Full Name (Last, First, Middle Initial) WILLIAM KELLEY Mailing Address 1970 WOODLANDS PL			Date of Receipt
	City	State	Zip Code	0 6 0 3 2 0 0 6 Transaction ID: INC:A:24517
	POWELL	ОН	43065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 625.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) GILBERT RAINES			Date of Receipt
	Mailing Address 800 SANDY TRAIL			06 03 2006
	City KELLER	State TX	Zip Code 76248	Transaction ID: INC:A:24670 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			50.08
	OTAL This Period (last page this line number or	ılv)	1	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17	
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)	
A. .	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a Full Name (Last, First, Middle Initial) FRANK SCHULTE Mailing Address 2121 AMERICA'S CUP CIR City State Zip Code LAS VEGAS NV 89117 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ C City State Zip Code Aggregate Year-to-Date ▼ Pull Name (Last, First, Middle Initial) THOMAS SHANAHAN Mailing Address 266 BRUSHY CREEK AVE City State Zip Code LAS VEGAS NV 89148 FEC ID number of contributing federal political committee. C C C C C C C C C C C C C			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation DIR OPS Aggregate			
Full Name (Last, First, Middle Initial) TIMOTHY SWETT Mailing Address 8362 GOLDEN PRAIRIE DRIVE				Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y	
City State			Zip Code	Transaction ID: INC:A:24439	
	TAMPA FEC ID number of contributing federal political committee.	C	33647	Amount of Each Receipt this Period 50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 685.00		
s	UBTOTAL of Receipts This Page (optional)			87.77	
т.	OTAL This Period (last page this line number on	v)			

S	CHEDULE A (FEC Form 3X)		lles esperate eshedule(e)	FOR LINE NUMBER: PAGE 10 / 220
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
<u>Ö.</u>	NAME OF COMMITTEE (In Full)	arrio di la dac	ress of any political committee to	Soliot Contributions from Such Committee.
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a k a	Medco Health PAC)
	WEDGO HEALTH GOLOTIONS INC. I	JEITIONE 7	to from oominit fee (a.n.a.	. Medee Health 1 7.0)
_	Full Name (Last, First, Middle Initial)			
Α.	CALVIN WASDYKE	_		Date of Receipt
	Mailing Address 5 APPLE ORCHARD RI)		06 03 2006
	City	State	Zip Code	Transaction ID: INC:A:24514
	MOORESTOWN	NJ	08057	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS	VP/GM		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		312.50	
	Other (specify)	0 0	0.12.00	
_	Full Name (Last, First, Middle Initial)			5. (5
В.				Date of Receipt
	Mailing Address 8174 MT AIR PL			06 03 2006
	City	State	Zip Code	Transaction ID: INC:A:24522
	COLUMBUS	ОН	43235	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS	DIR PHA	RM PRACTICE	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		625.00	
	Other (specify)		020.00	
_	Full Name (Last, First, Middle Initial)			
U.	LUCILLE ACCETTA Mailing Address 11 ANDOVER CT			Date of Receipt
	Maining Address ANDOVER CI			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24434
	CORTLANDT MANOR	NY	10567	Amount of Each Receipt this Period
	FEC ID number of contributing	C		25.00
	federal political committee.	<u> </u>		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		-	SALES & NATL ACCTS Year-to-Date	_
	Receipt For: Ag		rtear-l0-Dale ▼	
	Other (specify)		325.00	
		-	0 0 0 0 0 0 0	'
	<u> </u>			
s	UBTOTAL of Receipts This Page (optional))	62.50
\vdash			·	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 220 (check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	
_		_		
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) EDWARD ADAMCIK			Date of Receipt
	Mailing Address 1021 SUNSET RIDGE			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24367
	BRIDGEWATER	NJ	08807	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHAP	n RM CONTRACT & CONSUL	TING
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General		050.00	
	Other (specify)		650.00	
В.	Full Name (Last, First, Middle Initial) STEPHEN ADLER			Date of Receipt
	Mailing Address 139 BELLVALE LAKES F	M M / D D / Y Y Y Y		
		06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24416
	WARWICK	NY	10990	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	MEDCO HEALTH SOLUTIONS	VP INFO	TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		050.00	
	Other (specify) ▼	0 0	650.00	
_	Full Name (Last, First, Middle Initial)			+
C.	MARENE ALLISON			Date of Receipt
	Mailing Address 4405 WISMER ROAD			06 10 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24691
	DOYLESTOWN	PA	18901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SECU	ı JRITY & ASSET PROTECTI	
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General			1
	Other (specify)		455.00	
				'
	UPTOTAL of Provide Till Provide T			135.00
Ls	UBTOTAL of Receipts This Page (optional)		······	

S	CHEDULE A (FEC Form 3X)		l la a a su a vala a a la di da (a)	FOR LINE NUMBER: PAGE 12 / 220
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
<u>Ö.</u>	NAME OF COMMITTEE (In Full)	arric aria aac	political committee to	Solicit Schilibations from Sach Schiliffities.
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO		ACTION COMMITTEE (a.k.a.	Madco Health PAC)
	MEDOG HEAETH GOLO HONG. I'V	JEITIOAL A	TOTION GOIVIIVITTEL (a.K.a.	i wedoo rieamir Ao)
	Full Name (Last, First, Middle Initial)			
A.	JAMES ALLOCCO			Date of Receipt
	Mailing Address 146 JOHNSON RD			06 10 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24469
	SCARSDALE	NY	10583	
		INI	10303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			TECHNOLOGY	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		325.00	
				'
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 10 WHIPPOORWILL LA	AKE ROAD		06 10 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24666
	CHAPPAQUA	NY	10514	Amount of Each Receipt this Period
			10014	Amount of Lacif Neceipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1 TECHNOLOGY	
	Receipt For:		Year-to-Date V	_
	Primary General	Aggregate	FIGAI-IO-DAIC V	
	Other (specify)		650.00	
_	Full Name (Last, First, Middle Initial)			
C.	ROGER ANDERSON			Date of Receipt
	Mailing Address 833 OXFORD COURT			0 6 1 0 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24686
	LEWISVILLE	TX	75056	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		192.30
	Name of Employer	Occupation	<u> </u>	-
	Name of Employer MEDCO HEALTH SOLUTIONS		HIEF PHARMACIST	
	Receipt For:	1	Year-to-Date ▼	1
	Primary General	33 3		
	Other (specify) 🔻		1219.20	
_				
				267.30
S	UBTOTAL of Receipts This Page (optional)	·····	······································	207.30

COLLEDING A (FEO Forms OV)				FOR LINE NUMBER: PAGE 13 / 220
5	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)
IT	EMIZED RECEIPTS	or each category of the		
••			Detailed Summary Page	
				13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and ado	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.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JAYME ANTONOPLOS			Date of Receipt
	Mailing Address 417 MILLS COURT			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24533
	FLORHAM PARK	NJ	07932	Amount of Each Receipt this Period
	FEC ID asserbles of a settlibution			
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR EXE		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		325.00	
				·
— В.	Full Name (Last, First, Middle Initial) DAVID ARCISZEWSKI			Date of Receipt
	Mailing Address 20 CHADWELL PLACE	M M / D D / Y Y Y Y		
		06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24483
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing			05.00
	federal political committee.	C		25.00
	Name of Employer	Ossumation		_
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CC		
	Receipt For:		Year-to-Date ▼	_
	Primary General	riggrogato	Total to Buto \$	1
	Other (specify)		325.00	
	Cirici (Specify)	1 1		J. Communication of the commun
	Full Name (Last, First, Middle Initial)			
C.	BECKIE BARATKO			Date of Receipt
	Mailing Address 80 N. WOODLAND STRI	06 10 2006		
	City	State	Zip Code	
	City ENGLEWOOD	NJ	07631	Transaction ID: INC:A:24609
		INU	07631	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	
	MEDCO HEALTH SOLUTIONS	VP PROF	POSAL UNIT	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1 I
	Other (specify) ▼		325.00	
				·
_	UDTOTAL «CD-s-siste Till D			75.00
8	UBTOTAL of Receipts This Page (optional)			

S	CHEDULE A (FEC Form 3X)		Harris and a selection of the selection (s)	FOR LINE NUMBER: PAGE 14 / 220
	· ·		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			• •	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any person	on for the purpose of soliciting contributions
Or	1 1 ,	ame and add	aress or any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	NITIONI A	OTION COMMITTEE ()	Markardia DAO
\angle	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) THOMAS BARATTA			Date of Receipt
	Mailing Address 69 SKYLINE DR			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24545
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing		0.100	
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	
	Receipt For:		Year-to-Date ▼	
	Primary General		1 1 1 1 1 1 1	1
	Other (specify) ▼		370.00	
В.	Full Name (Last, First, Middle Initial) MICHAEL BARONE			Date of Receipt
	Mailing Address 452 MEDWAY RD			M M / D D / Y Y Y Y
	011	01-1-	7'- 0-4-	06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24697
	HIGHLAND HEIGHTS	OH	44143	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		GENERA		<u></u>
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)	' '	3250.00	
	Other (specify)	0 0		
<u> </u>	Full Name (Last, First, Middle Initial) BRENDA BASSETT			Date of Receipt
J .	Mailing Address 1752 BLACKSTONE DF	21\/F		M M / D D / Y Y Y Y
	Maining Address 1752 BEACKSTONE DI	II V L		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24608
	CARROLLTON	TX	75007	Amount of Each Receipt this Period
	FEC ID number of contributing	0		50.00
	federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATL		
	Receipt For:		Year-to-Date ▼	7
	Primary General		250.00	1
	Other (specify) ▼		650.00	
_				
				050.00
s	UBTOTAL of Receipts This Page (optional)			350.00
\vdash				

9	CHEDIII E A /EEC Form 2V)	[FOR LINE NUMBER: PAGE 15 / 220
	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)
IT	EMIZED RECEIPTS	or each category of the		X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
۸r	y information copied from such Reports and St	atomonte may	y not be cold or used by any norse	
or	for commercial purposes, other than using the	name and add	froit be sold of used by any personal disease of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
			`	,
	Full Name (Last, First, Middle Initial)			
Α.	DAVID BAUGH			Date of Receipt
	Mailing Address 1813 ADONIS AVE			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24656
	HENDERSON	NV	89074	Amount of Each Receipt this Period
			00074	Amount of Each receipt this renou
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			NEFIT DELIVERY SYSTEM	<u>S</u>
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		580.00	
	Other (specify)	0 0		J.
_	Full Name (Last, First, Middle Initial)			
В.	PATRICE BAVARO			Date of Receipt
	Mailing Address 9933 TOLEDO DRIVE	NORTH		M M / D D / Y Y Y Y
		06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24626
	BROOKLYN PARK	MN	55443	Amount of Each Receipt this Period
	FEC ID number of contributing	C		25.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	┥
	MEDCO HEALTH SOLUTIONS		MEDICARE OPS	
	Receipt For:	Aggregate	Year-to-Date V	7
	Primary General		202.00	1
	Other (specify)		300.00	
C	Full Name (Last, First, Middle Initial) PETER BEGANS			Date of Receipt
Ο.	Mailing Address 1605 CHARNITA CT			M M / D D / Y Y Y Y
	Maining / Mainin			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24509
	VIENNA	VA	22182	Amount of Each Receipt this Period
	FEC ID number of contributing			100.00
	federal political committee.	C		100.00
	Name of Employer	Occupation		
	Name of Employer MEDCO HEALTH SOLUTIONS		ERNMENT AFFAIRS	
	Receipt For:		Year-to-Date ▼	\dashv
	Primary General	99. 09410		1
	Other (specify)		1300.00	
				1
s	UBTOTAL of Receipts This Page (optional)			150.00
F	1			-

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 220 (check only one) X 11a 11b 11c 12
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and ado	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) STEPHEN BELL Mailing Address 24 GLENWOOD ROAD			Date of Receipt
	City	State	Zip Code	0 6 1 0 2 0 0 6 Transaction ID: INC:A:24669
	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	Occupation VP FINAL		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
3.	Full Name (Last, First, Middle Initial) ROBERT BENSON Mailing Address 304 BERKSHIRE AVE			Date of Receipt
	Walling Address 304 BERNSTINE AVE			06 10 2006
	City NEW MILFORD	State NJ	Zip Code 07646	Transaction ID: INC:A:24543
	FEC ID number of contributing federal political committee.	C	07040	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		FIT DELIVERY SYSTEMS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
- C.	Full Name (Last, First, Middle Initial) FLOYD BILLINGS			Date of Receipt
	Mailing Address 4273 BROGDAN FARM (COURT		06 10 / 9 9 9
	City BUFORD	State GA	Zip Code 30518	Transaction ID: INC:A:24554
	FEC ID number of contributing federal political committee.	C	30310	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
s	UBTOTAL of Receipts This Page (optional)			125.00
T	OTAL This Period (last page this line number onl	y)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 220
	EMIZED RECEIPTS		or each category of the	(check only one)
• • • • • • • • • • • • • • • • • • • •	EWIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may lame and add	rnot 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)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
	MESOS HEREIN SOCIETIONS INC. I)	to Hort Goldmin 1722 (a.i.i.a	. Modeo Hodili 1710)
_	Full Name (Last, First, Middle Initial)			
Α.	BRYAN BIRCH			Date of Receipt
	Mailing Address 4 WINDRUSH LANE			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24664
	WESTPORT	CT	06880	
		- 01	00000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			PRES, EMPLOYER GROUP	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	2496.00	
	Cirici (Specify)			1
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 50 NEW ENGLAND DR			M M / D D / Y Y Y Y
	<u></u>		7' 0 1	06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24498
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		1	CLIENT & MKT PROG STRA	AII
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	,
	Other (specify)	' '	325.00	
	and (epseny) ψ	0 0	1 1 1 1 1 1 1	1
_	Full Name (Last, First, Middle Initial)			
C.	KENNETH BODMER			Date of Receipt
	Mailing Address 15 WEISS DR			0 6 1 0 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:24582
	TOWACO	NJ	07082	Amount of Each Receipt this Period
	FEC ID number of contributing		07002	
	federal political committee.	C		50.00
	· · · · · · · · · · · · · · · · · · ·			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1 VP FINANCE	
	Receipt For:		Year-to-Date V	\dashv
	Primary General	riggrogate	Tour to Bute V	1
	Other (specify)		650.00	
_	·			
Г	<u> </u>			207.00
s	UBTOTAL of Receipts This Page (optional)			267.00
Г				
ΙT	OTAL This Period (last page this line number or	nlv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: (check only one)	PAGE 18/220
-			Detailed Summary Page	X 11a 11b 11b 14	11c 12 15 16 17
An or	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciti solicit contributions from s	ng contributions uch committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL				
۹.	Full Name (Last, First, Middle Initial) MICHAEL BOGDA Mailing Address 80 LEONA CT	Chata	7in Onda	Date of Receipt M M / D D 0 6 1 0	2006
	City LEVITTOWN	State NY	Zip Code 11756	Transaction ID: INC Amount of Each Rec	
	FEC ID sounds or of a carbollo stice.	C		Through the East Tree	25.00
	MEDCO HEALTH SOLUTIONS		CAL SPECIALIST Year-to-Date ▼ 325.00		
3.	Full Name (Last, First, Middle Initial) JOSEPH BOTTA Mailing Address 109 ARBOR PL			Date of Receipt	/ Y Y Y Y Y
	City	State	Zip Code	0 6 1 0 Transaction ID: INC	2 0 0 6
	BRYN MAWR	PA	19010	Amount of Each Rec	
	FEC ID number of contributing federal political committee.	С			25.00
	MEDOO HE'NI TH SOLLITIONS	Occupation /P SALE			
	· · · · · · · · · · · · · · · · · · ·		Year-to-Date ▼ 325.00		
		0 0	0 0 0 0 0 0 0		
Э.	Full Name (Last, First, Middle Initial) SALLIE BOWDEN			Date of Receipt	
	Mailing Address 5259 FISHERCREST LN			0 6 1 0	2006
	City	State	Zip Code	Transaction ID: INC	
	RICHMOND	VA	23231	Amount of Each Rec	
	FEC ID number of contributing federal political committee.	С			200.00
	MEDOO HE'NI TH SOLLITIONS	Occupation P FORM	n MULARY CONSULTING		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2600.00		
s	UBTOTAL of Receipts This Page (optional))		250.00
T	OTAL This Period (last page this line number only))			

91	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 19 / 220
	•		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Suffilliary Fage	13 14 15 16 17
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) HEIDI BOWMAN			Date of Receipt
	Mailing Address 15 DAWN LANE			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24652
	RINGWOOD	NJ	07456	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 H	n HLTH MGMT	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	390.00	1
	Other (specify)			J
— В.	Full Name (Last, First, Middle Initial) PATRICIA BRANUM			Date of Receipt
	Mailing Address 210 FROG HOLLOW R	M M / D D / Y Y Y Y		
	PO BOX 708			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24604
	COATESVILLE	PA	19320	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	1 & PROCESS ENGINEERIN	IG
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		800.00	1
	Other (specify)		800.00	
	Full Name (Last, First, Middle Initial) DAVID BREEN			Date of Receipt
٥.	Mailing Address 27 SEALS DR			M M / D D / Y Y Y Y
				06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24583
	MONROE	NY	10950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANA	1 LYTICAL SVCS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		325.00	1
	Other (specify)		323.00	1
_	LIDTOTAL of Descints This Description in			130.00
S	UBTOTAL of Receipts This Page (optional)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 20 / 220 (check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) KENNETH BROWN			Date of Receipt
	Mailing Address 540 GIORDANO DRIVE			06 10 2006
	City YORKTOWN HEIGHTS	State NY	Zip Code 10598	Transaction ID: INC:A:24398 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10330	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS REQUIREMENTS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
3.	Full Name (Last, First, Middle Initial) VIVIAN BULGER			Date of Receipt
	Mailing Address 120 EAST MAIN ST			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24581
	WASHINGTONVILLE FEC ID number of contributing federal political committee.	C	10992	Amount of Each Receipt this Period 20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	
 C.	Full Name (Last, First, Middle Initial) KEVIN BURON			Date of Receipt
	Mailing Address 301 TEMPLETON CT			06 10 2006
	City GRANITE BAY	State CA	Zip Code	Transaction ID: INC:A:24486
	FEC ID number of contributing federal political committee.	CA	95746	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
s	UBTOTAL of Receipts This Page (optional)			95.00
Т	OTAL This Period (last page this line number on	v)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) PEGEEN BUTTERFIELD Mailing Address 23 NUTTING PLACE City WEST CALDWELL FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07006 n MEMBER STRATEGY e Year-to-Date ▼	Date of Receipt M M D D 2 0 0 6 Transaction ID: INC:A:24424 Amount of Each Receipt this Period
3.	Full Name (Last, First, Middle Initial) DOREEN CALDER Mailing Address 441 S ELM STREET	0 0		Date of Receipt M M J J D J J J J J J J J J J J J J J J
	City MAYWOOD FEC ID number of contributing federal political committee.	State NJ	Zip Code 07607	Transaction ID: INC:A:24353 Amount of Each Receipt this Period 40.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		n SINESS REQUIREMENTS e Year-to-Date ▼ 520.00	
D .	Full Name (Last, First, Middle Initial) RAYMOND CARLUCCI Mailing Address 24 SHERI DRIVE			Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ALLENDALE FEC ID number of contributing federal political committee.	State NJ	Zip Code 07401	Transaction ID: INC:A:24576 Amount of Each Receipt this Period 52.50
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: □ Primary □ General □ Other (specify) ▼		n AL MGR GROUP e Year-to-Date ▼ 682.50	
s	UBTOTAL of Receipts This Page (optional)			117.50
T	OTAL This Period (last page this line number of	nlv)		

2	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 22 / 220	
	· · · · · · · · · · · · · · · · · · ·		Use separate schedule(s)	(check only one)	
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12	
			Detailed Guillinary Fage	13 14 15 16	7 17
An	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.	
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
/			`	,	
	Full Name (Last, First, Middle Initial)				
۹.	MARY CASALE			Date of Receipt	
	Mailing Address 822 CEDAR AVE			06 10 2006	
		0	7: 0 1		
	City	State	Zip Code	Transaction ID: INC:A:24489	
	HADDENFIELD	NJ	08033	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		25.00	
	federal political committee.	9			
	Name of Employer	Occupation	n	-	
	Name of Employer MEDCO HEALTH SOLUTIONS	VP SALE			
	Receipt For:		e Year-to-Date ▼		
	Primary General	7.99.094.0	· · · · · · · · · · · · · · · · · · ·	1	
	Other (specify)		325.00		
			0 0 0 0 0 0 0	1	
	Full Name (Last, First, Middle Initial)				
3.	KAREN CATHCART RUSSELL			Date of Receipt	
	Mailing Address 148 CLUBHOUSE DR			M ' M / D ' D / Y ' Y ' Y ' Y	
				06 10 2006	
	City	State	Zip Code	Transaction ID: INC:A:24370	
	WEST COLUMBIA	SC	29172	Amount of Each Receipt this Period	
	FEC ID number of contributing			05.00	
	federal political committee.	C		25.00	
	federal political committee.			25.00	
	federal political committee.	Occupation		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (CLINICAL SVCS	25.00	
	federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR (25.00	
	Receipt For: Primary General	Occupation SR DIR (CLINICAL SVCS 9 Year-to-Date ▼	25.00	
	federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR (CLINICAL SVCS	25.00	
	Receipt For: Primary Other (specify)	Occupation SR DIR (CLINICAL SVCS 9 Year-to-Date ▼	25.00	
	Receipt For: Primary Other (specify)	Occupation SR DIR (CLINICAL SVCS 9 Year-to-Date ▼		
. C.	federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI	Occupation SR DIR (CLINICAL SVCS 9 Year-to-Date ▼	Date of Receipt	
	Receipt For: Primary Other (specify)	Occupation SR DIR (CLINICAL SVCS 9 Year-to-Date ▼	Date of Receipt	
C .	federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI	Occupation SR DIR (CLINICAL SVCS 9 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	
D.	Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE	Occupation SR DIR (Aggregate	CLINICAL SVCS e Year-to-Date ▼ 265.00	Date of Receipt M M D D 2 0 0 6	
D.	Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO	Occupation SR DIR (Aggregate	CLINICAL SVCS e Year-to-Date ▼ 265.00 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	
D .	Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR (Aggregate	CLINICAL SVCS e Year-to-Date ▼ 265.00 Zip Code	Date of Receipt M M D D 2 0 0 6	
C .	federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO FEC ID number of contributing federal political committee.	Occupation SR DIR C Aggregate State NJ	ZELINICAL SVCS 2 Year-to-Date ▼ 265.00 Zip Code 07746	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
- .	federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO FEC ID number of contributing federal political committee.	Occupation SR DIR (Aggregate State NJ C	Zip Code 07746	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
D.	Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State NJ Occupation SR DIR (Zip Code 07746	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
- .	Federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State NJ Occupation SR DIR (Zip Code 07746	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
D.	Federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State NJ Occupation SR DIR (Zip Code 07746 DUR e 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	
C.	Federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State NJ Occupation SR DIR (Zip Code 07746	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State NJ Occupation SR DIR (Zip Code 07746 DUR e 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	
D.	federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	State NJ C Occupation SR DIR (Zip Code 07746 DUR e Year-to-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	
S.	Federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	State NJ C Occupation SR DIR (Zip Code 07746 DUR e Year-to-Date ▼ 325.00	Date of Receipt M M J D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
S.	federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) JOSEPH CONOSHENTI Mailing Address 5 MAGNOLIA DRIVE City MARLBORO FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	State NJ C Occupation SR DIR (Zip Code 07746 DUR 245.00 Zip Code 07746 25.00	Date of Receipt M M J D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 23 / 220
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or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from	such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)	
_			·		
	Full Name (Last, First, Middle Initial)				
٩.	WILLIAM CONSIDINE			Date of Receipt	
	Mailing Address 130 WEST 67TH STREE	ET, #4J		0 6 1 0	2006
	Oit.	01-1-	7:- 0-4-		
	City	State	Zip Code	Transaction ID: IN	
	NEW YORK	NY	10023	Amount of Each Re	ceipt this Period
	FEC ID number of contributing	С			25.00
	federal political committee.	0			
	Name of Employer	Occupation	า	-	
	Name of Employer MEDCO HEALTH SOLUTIONS		BUSINESS PLANNING & DE	V	
	Receipt For:		Year-to-Date ▼	\exists	
	Primary General	1.99.19			
	Other (specify)		325.00		
		-	0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)				
3.	ROBERT COOK			Date of Receipt	
	Mailing Address 270 S FRANKLIN TURN	PIKE		M M / D D	/ Y Y Y Y Y
		06 10	2006		
	City	Transaction ID: IN	C:A:24392		
	RAMSEY	NJ	07446	Amount of Each Re	ceipt this Period
	FEC ID number of contributing				05.00
	federal political committee.	C			25.00
	N (5)				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		J	
			H CARE OPS-TECHNOLOG	<u>*</u>	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)	' '	325.00		
	Other (specify)	1 1	0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)			+	
Э.	STEPHEN COURTMAN			Date of Receipt	
	Mailing Address 25 FAIRWAY TRAIL			M M / D D	/
				06 10	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24470
	SPARTA	NJ	07871	Amount of Each Re	
	FEC ID number of contributing				
	federal political committee.	C			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
		l	RMACY NETWORK MGMT	_	
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		375.00		
	Other (specify) ▼		070.00		
					100.00
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9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 24 / 220
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IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
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Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the i	atements may	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)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ROSELIN DANIEL			Date of Receipt
	Mailing Address 17 DEVONSHIRE DRIV	Æ		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24558
	RANDOLPH	NJ	07869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1	BENEFIT DELIVERY SYS	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		325.00	
_	Full Name (Last, First, Middle Initial)			
В.	KENNETH DANIELS			Date of Receipt
	Mailing Address 2903 CHUKKAR COUF	0 6 1 0 2 0 0 6		
	City	State	Zip Code	Transaction ID: INC:A:24535
	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	ı	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	625.00]
<u> </u>	Full Name (Last, First, Middle Initial) MARY DASCHNER			Date of Receipt
•	Mailing Address 2926 EWING AVE S			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: INC:A:24450
	MINNEAPOLIS	MN	55416	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR MEDICARE	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		2499.90]
s	UBTOTAL of Receipts This Page (optional)			242.30
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Sí	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 25/220
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$\overline{}$	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) DANIEL DAVISON			Date of Receipt	
	Mailing Address 402 HIGHLAND AVE			06 / 10	2006
	City	State	Zip Code	Transaction ID: IN	
	RIDGEWOOD	NJ	07450	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRIC]	
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		650.00		
	Other (specify) ▼		0.00.00		
3.	Full Name (Last, First, Middle Initial) LUCA DEFLORENTIIS			Date of Receipt	
	Mailing Address W62 N1032 FAIRHAVEN	N CT		06 / 10	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24510
	CEDARBURG	WI	53012	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		325.00		
).	Full Name (Last, First, Middle Initial) PAUL DENIS			Date of Receipt	
	Mailing Address 101 HALIFAX ROAD			0 6 1 0	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24591
	MAHWAH	NJ	07430	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CON	1 TRACT ADMINISTRATOR]	
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		1300.00		
	Other (specify) ▼		1000.00		
SI	JBTOTAL of Receipts This Page (optional)		·····		175.00
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 26 / 220
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
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			, ,	13 14 15 16 17
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any person	n for the purpose of soliciting contributions
01		arie ariu auc	diess of any political committee to	Solicit Contributions from Such Committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Modes Health BAC)
	MEDGO HEALTH SOLUTIONS INC. FO	LITIOAL F	ACTION COMMITTEE (a.K.a.	Medco Health FAC)
_	Full Name (Last, First, Middle Initial)			
A.	KAREN DEZEARN			Date of Receipt
	Mailing Address 3625 PATTERSTONE D	R		0 6 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zin Codo	
	ALPHARETTA	GA	Zip Code 30022	Transaction ID: INC:A:24372
		GA	30022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Todoral political committees.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			ACCT EXEC	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	' '	325.00	
	canor (operating)	0 0		
	Full Name (Last, First, Middle Initial)			
В.	ROBBIN DICESARE			Date of Receipt
	Mailing Address 1003T HIGH STREET			0 6 1 0 Y Y Y Y Y Y Y
	City	State	Zip Code	
	BURLINGTON TOWNSHI	NJ	08016	Transaction ID: INC:A:24572 Amount of Each Receipt this Period
		140	00010	Amount of Each Necelpt this Period
	FEC ID number of contributing federal political committee.	C		9.28
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		TECHNOLOGY Year-to-Date ▼	_
	Primary General	Aggregate	r rear-to-Date ▼	
	Other (specify)		232.00	
_	Full Name (Last, First, Middle Initial)			
C.	WILLIS DINGLE			Date of Receipt
	Mailing Address 17826 ARBOR GREENE	DR		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24423
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		2	_
	Receipt For:	SR DIR H	Year-to-Date ▼	1
	Primary General	.55.09410		
	Other (specify) ▼		625.00	
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				50.00
s	UBTOTAL of Receipts This Page (optional))	59.28
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 27 / 220	_
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			Detailed Summary Page	13 14 15 16 1	17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO				
۹.	Full Name (Last, First, Middle Initial) ROBERT DOLAN			Date of Receipt	
	Mailing Address 9 CRANE AVENUE			0 6 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City WEST CALDWELL	State NJ	Zip Code	Transaction ID: INC:A:24559	
	FEC ID number of contributing	C	07006	Amount of Each Receipt this Period 25.00	1
	federal political committee.				_
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BEN	1 EFIT DELIVERY SYSTEMS		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		325.00		
3.	Full Name (Last, First, Middle Initial) MERIDITH DORNER			Date of Receipt	
	Mailing Address 4448 CREEK ROAD			M M / D D / Y Y Y Y Y Y A D D D D D D D D D D D D D	
	City	State	Zip Code	Transaction ID: INC:A:24384	
	ALLENTOWN	PA	18104	Amount of Each Receipt this Period	-
	FEC ID number of contributing federal political committee.	С		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CCT EXEC		
	Receipt For:		Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	325.00		
 D.	Full Name (Last, First, Middle Initial) H.RONALD DRIZIN			Date of Receipt	
	Mailing Address 17 DAYBREAK			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:24615	
	IRVINE	CA	92614	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 CON	TRACT ADMINISTRATOR		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		650.00		
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\setminus	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MICHEL DUFRESNE			Date of Receipt
	Mailing Address 58 INDEPENDENCE W	AY		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24672
	MORRIS TWP	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼	0 0	2499.90	
В.	Full Name (Last, First, Middle Initial) DANA DUNCAN			Date of Receipt
	Mailing Address 72 HALLEY DR			0 6 1 0 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24492
	POMONA	NY	10970	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 ENG	i INEERING	7
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	325.00	
<u> </u>	Full Name (Last, First, Middle Initial) YAACOV DUSHEK			Date of Receipt
	Mailing Address 312 MEGAN CT			0 6 1 0 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24550
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BENEFIT DELIVERY SYS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00	
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91	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 29 / 220
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	NAME OF COMMITTEE (In Full)		7,	
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) GEORGIA EDDLEMAN			Date of Receipt
	Mailing Address 908 EDGEMEER LANE			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24640
	SOUTHLAKE	TX	76092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		34.45
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		861.25	
	Other (specify)		001.23	
— В.	Full Name (Last, First, Middle Initial) MICHAEL EDWARDS			Date of Receipt
	Mailing Address 109 KAREN PLACE			M " M / D " D / Y " Y " Y " Y
	-			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24397
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Nome of Employer	Occupation	`	_
	Name of Employer MEDCO HEALTH SOLUTIONS	VP SALE		
	Receipt For:		Year-to-Date ▼	7
	Primary General		005.00	1
	Other (specify) ▼		325.00	
<u> </u>	Full Name (Last, First, Middle Initial) EDWARD EISENBERG			Date of Receipt
	Mailing Address 128 SUMMIT AVENUE			M " M / D " D / Y " Y " Y " Y
				06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24685
	UPPER MONTCLAIR	NJ	07043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MEDICAL	n RE CHIEF MEDICAL OFFIC	ER
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		505.00	
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\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) A. FREDERICK ELSTON			Date of Receipt
	Mailing Address 106 GRAHAM TERRAC	E		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24551
	SADDLE BROOK	NJ	07663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1	325.00	
	Other (specify) ▼	0 0	020.00	
_	Full Name (Last, First, Middle Initial)			Pate of Paradist
В.	BRAD EPSTEIN Mailing Address 359 LONG HILL ROAD	EACT		Date of Receipt
	Walling Address 359 LONG FILL ROAD	06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24689
	BRIARCLIFF MANOR	NY	10510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORF	n P COMMUNICATIONS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		520.00	
	Other (specify)	0 0		
<u></u>	Full Name (Last, First, Middle Initial) ROBERT EPSTEIN			Date of Receipt
٠.	Mailing Address 75 TWEED BLVD			M M / D D / Y Y Y Y
				06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24347
	UPPER GRANDVIEW	NY	10960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CMO SVI	ո P MEDICAL&ANLYTC AFFF	RS
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		1560.00	
	Other (specify) ▼		1300.00	1
s	UBTOTAL of Receipts This Page (optional)			185.00
T-	OTAL This Period (last page this line number or	nlv)		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 31 / 220
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any person	n for the purpose of soliciting contributions
<u>Ş.</u>	NAME OF COMMITTEE (In Full)	arro arro acc	aroco or arry political committee to	
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	DITICAL A	ACTION COMMITTEE (a k a	Medco Health PAC)
	WEBSSTIE AETH SSESTIGITO ING. 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	to from Johnson File (a.m.a.	Thouse Health Free
_	Full Name (Last, First, Middle Initial)			
A.	YAKOV ESTERLIS			Date of Receipt
	Mailing Address 25 STONEHEDGE DR			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24642
	WEST NYACK	NY	10994	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer	Occupation	า	4
	Name of Employer MEDCO HEALTH SOLUTIONS		BENEFIT DELIVERY SYS	
	Receipt For:	1	Year-to-Date ▼	
	Primary General			
	Other (specify)		325.00	
R	Full Name (Last, First, Middle Initial) EDWARD FARGIS			Date of Receipt
υ.	Mailing Address 216 ELMWOOD AVENU	IF.		M M / D D / Y Y Y Y
	ZIO ELIVIVOOD AVEIVO) <u> </u>		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24665
	HO-HO-KUS	NJ	07423	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
		COUNSE	iL	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		325.00	
	Other (specify)	0 0	020.00	
_	Full Name (Last, First, Middle Initial)			
C.	RICHARD FEIFER			Date of Receipt
	Mailing Address 32 EILEEN DR			0 6 1 0 / 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:24455
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
			07400	
	FEC ID number of contributing federal political committee.	C		50.00
	· ·	10		_
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1 ICAL SVCS	
	Receipt For:		Year-to-Date ▼	-
	Primary General	, 1991 09410		
	Other (specify) ▼	1	650.00	
_				
		· · · · · ·		100.00
s	UBTOTAL of Receipts This Page (optional)			100.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 32 / 220
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) THOMAS FEITEL			Date of Receipt
	Mailing Address 58 APPLE HILL DR	Obsta	75.00-15	06 10 2006
	City GILLETTE	State NJ	Zip Code 07933	Transaction ID: INC:A:24487 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.23
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP COI	n RP MKTG & E-COMM	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2498.99	
В.	Full Name (Last, First, Middle Initial) EDWARD FISCHER Mailing Address 465 OLD STONE RD			Date of Receipt
	City	State	Zip Code	0 6 1 0 2 0 0 6 Transaction ID: INC:A:24445
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CARE OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00]
C.	Full Name (Last, First, Middle Initial) ANTHONY FLOWERS			Date of Receipt
	Mailing Address 1933 MT. OLIVE AGOSTA ROAD			06 10 7 2006
	City NEW BLOOMINGTON	State OH	Zip Code 43341	Transaction ID: INC:A:24526 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n HLTH CARE OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
s	UBTOTAL of Receipts This Page (optional)			242.23
Ļ	OTAL This Period (last nage this line number of	nalv)		

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IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 220 (check only one) X
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) KEVIN FRANCO Mailing Address 140 BELLAIR RD UNIT Q			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 RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC:A:24592 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
В.	Full Name (Last, First, Middle Initial) JOSEPH FRENDO			Date of Receipt
	Mailing Address 9 GREEN HILL TRAIL	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:24541
	TROPHY CLUB FEC ID number of contributing federal political committee.	C	76262	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1250.00	
<u> </u>	Full Name (Last, First, Middle Initial) ANDREW FRIEDELL			Date of Receipt
	Mailing Address 55 WHEELER			0 6 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City EDGEWOOD	State RI	Zip Code 02905	Transaction ID: INC:A:24415 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS		TE GOVERNMENT AFFAIRS	6
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 390.00	
s	UBTOTAL of Receipts This Page (optional)			100.00

TOTAL This Period (last page this line number only)

COLIEDIU E A /EEO Eormo OV)				FOR LINE NUMBER: PAGE 34 / 220
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	
			Detailed Summary Page	
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and ado	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)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JOSEPH GALARDI			Date of Receipt
	Mailing Address 24 MOREHOUSE PL			06 10 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24345
	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 MANAGI	n NG COUNSEL	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		05000	1
	Other (specify) ▼		650.00	
				4
В.	Full Name (Last, First, Middle Initial) PAMELA GALASSINI			Date of Receipt
	Mailing Address 333 N. CANAL ST. #180	M M / D D / Y Y Y		
		06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24651
	CHICAGO	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing			100.00
	federal political committee.	C		100.00
				_
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		GENERA		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1300.00	1
	Other (specify) ▼		1300.00	
C.	Full Name (Last, First, Middle Initial) BARNEY GALLASSIO			Date of Receipt
	Mailing Address 69 LAKEVIEW DR			06 10 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24516
	OLD TAPPAN	NJ	07675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n NT RELATIONS	
	Pagaint For:	1		_
	Receipt For:	Aggregate	Year-to-Date ▼	,
	Primary General		381.92	
	Other (specify)		332	1
		000.00		
s	UBTOTAL of Receipts This Page (optional)			200.00
\vdash	<u> </u>		·	-

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ly information copied from such Reports and State for commercial purposes, other than using the nam	ments may ne and add	not be sold or used by any persor lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
/	NAME OF COMMITTEE (In Full)			
/	MEDCO HEALTH SOLUTIONS INC. POL	ITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MICHAEL GALVIN			Date of Receipt
	Mailing Address 4 LONE PINE LANE			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:24674
	WESTPORT	CT	06880	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	MEDCO HEALTH SOLLITIONS	Occupation SVP/CHII	n EF INFRASTRUCTURE OFF	_
		Aggregate	Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	0 0	1625.00	
3.	Full Name (Last, First, Middle Initial) PETER GAYLORD			Date of Receipt
	Mailing Address 1201 BRIDGE STREET	06 10 2006		
	City ASBURY PARK	State NJ	Zip Code 07712	Transaction ID: INC:A:24344
	FEC ID number of contributing		01112	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	MEDOO HE'ALTH SOLLITIONS	Occupatior VP FINAI	n NCIAL EVALUATIONS	
	Receipt For:		Year-to-Date ▼	1
	Primary General Other (specify) ▼		650.00	
	Full Name (Last, First, Middle Initial) FRANK GENTILELLA			Date of Receipt
-•	Mailing Address 20 BROOKSHIRE DR			M M / D D / Y Y Y Y
	City	State	Zip Code	0 6 1 0 2 0 0 6 Transaction ID: INC:A:24421
	ROBBINSVILLE	NJ	08691	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	MEDOO HE'ALTH SOLLITIONS	Occupation GENERA	n L MGR GROUP	
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	650.00	
s	UBTOTAL of Receipts This Page (optional)		·····	225.00
_	OTAL This Daded Assessment P	۸	` _	
	OTAL This Period (last page this line number only	')	P	

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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 36 / 220
	EMIZED RECEIPTS	or each category of the Detailed Summary Page		(check only one)
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Ar	ny information copied from such Reports and Sta	atements may	not be sold or used by any perso	
or	for commercial purposes, other than using the r	ame and add	ress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) THOMAS GILSON			Date of Receipt
	Mailing Address 2 PELL FARM ROAD			06 10 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24647
	SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		2500.03	
	Curici (Specify)		0 0 0 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) MICHELE GLYNN			Date of Receipt
	Mailing Address 26 FURMAN CT			0 6 1 0 / 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:24562
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		23.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
			PRODUCT MGMT	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	325.00	
<u> </u>	Full Name (Last, First, Middle Initial) JAMES GORMAN			Date of Receipt
	Mailing Address 11 WASHBURN RD			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:24393
	CANTON	CT	06022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	n CLIENT & MKT PROG STRA	П
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		325.00	
	Other (specify) ▼		323.33	
s	UBTOTAL of Receipts This Page (optional)			242.31
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SCHEDULE A (FEC Form 3X)			Llac concrete cobodula(a)	FOR LINE NUMBER: PAGE 37 / 220
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
•	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
\angle				,
	Full Name (Last, First, Middle Initial)			Data of Bassist
Α.	JAMES GRANT Mailing Address 1928 BEVERLY LANE			Date of Receipt
	1926 BEVERLY LANE			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24435
	BUFFALO GROVE	IL	60089	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		23.00
	Name of Employer	Occupation	 1	┪
	Name of Employer MEDCO HEALTH SOLUTIONS		NCIAL INSIGHTS	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General		205.00	
	Other (specify) ▼		325.00	
_	E. III Norman (Londo Eleato Middle Leithal)			
В.	Full Name (Last, First, Middle Initial) EDWARD GRIX			Date of Receipt
	Mailing Address 525 ORANGEBURG RD)		M M / D D / Y Y Y Y
				06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24457
	PEARL RIVER	NY	10965	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Tederal political continuitee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		1	E-COM BUSINESS OPS	4
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	315.00	
			0 0 0 0 0 0 0	'
_	Full Name (Last, First, Middle Initial)			
C.	GINA GRUHN			Date of Receipt
	Mailing Address 13 WEATHER VANE DR	RIVE		0 6 1 0 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24482
	CONVENT STATION	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.			23.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS	VP SALE		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		325.00	
	Other (specify) ▼		020.00	
٩	UBTOTAL of Receipts This Page (optional)			75.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 38 / 220
IT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b] 11c
			Detailed Summary Page	13 14	15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	on for the purpose of solicit	ing contributions
<u></u>	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) RICHARD GUIOR			Date of Receipt	
	Mailing Address 50 BELLEVUE AVE			06 10	2006
	City SUMMIT	State NJ	Zip Code	Transaction ID: IN	
			07901	Amount of Each Re	celpt this Period
	FEC ID number of contributing federal political committee.	C			90.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACC			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		1170.00		
3.	Full Name (Last, First, Middle Initial) MARK HALLORAN			Date of Receipt	
	Mailing Address 19 KINGS RIDGE ROAD)		06 10	2006
	City	State Zip Code			
	LONG VALLEY	NJ	07853	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C			80.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF IN	n IFO OFFICER		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		1040.00		
<u> </u>	Full Name (Last, First, Middle Initial) GREGORY HANSEN			Date of Receipt	
	Mailing Address 1659 ISABELLA PARKW	/AY		06 10	2006
	City	State	Zip Code	Transaction ID: IN	
	CHASKA	MN	55318	Amount of Each Red	ceipt this Period
FEC ID number of contributing federal political committee.		C			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACC1	n FSVCS & ADMIN		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		650.00		
s	UBTOTAL of Receipts This Page (optional)				220.00
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T	OTAL This Period (last page this line number on	ly)			

91	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 39 / 220
	•	Use separate schedule(s)		(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Guillinary Fage	13 14 15 16 17
An	y information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any personers of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,	
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) KELLY HANZAWA			Date of Receipt
	Mailing Address 1116 OAKCROFT LAN	E		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24618
	SOMERSET	NJ	08873	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ENT REQUIREMENTS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	325.00	
	Other (specify)		0 0 0 0 0 0 0	4
В.	Full Name (Last, First, Middle Initial) PETER HARTY			Date of Receipt
	Mailing Address 19520 YELLOW WING	COURT		M M / D D / Y Y Y Y
	01.	01-1-	7'- 0-4-	06 10 2006
	COLORADO CERRINOS	State	Zip Code	Transaction ID: INC:A:24346
	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 POLICE		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2273.86]
— С.	Full Name (Last, First, Middle Initial) BILL HEAD			Date of Receipt
	Mailing Address 501 SLATERS LANE #816			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:24694
	ALEXANDRIA	VA	22314	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 PUB	n LIC AFFAIRS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		220.00	1
	Other (specify)		220.00	7
	UDTOTAL (D TV D			242.31
	UBTOTAL of Receipts This Page (optional)			

COUEDINE A (EEC Form 2V)				FOR LINE NUMBER: PAGE 40 / 220
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		(check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Suffiffially Fage	13 14 15 16 17
Ar	ny information copied from such Reports and Sta	atements may	not be sold or used by any pers	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MARK HEGGESTAD			Date of Receipt
	Mailing Address 13210 N. 11TH AVE.			06 10 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24402
	PHOENIX	AZ	85029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR SALI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1	325.00	7
	Other (specify)	0 0	323.00	1
— В.	Full Name (Last, First, Middle Initial) SCOTT HELMUS			Date of Receipt
	Mailing Address 23 VALLEY RD			M M / D D / Y Y Y Y
	-		7.0.1	06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24386
	SUCCASUNNA	NJ	07876	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	<u> </u>	_
		VP PHAF		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		550.00	11
	Other (specify)	0 0		
<u> </u>	Full Name (Last, First, Middle Initial) ERIC HESS			Date of Receipt
	Mailing Address 10 CARLTON RD			M M / D D / Y Y Y Y
	011	01-1-	7'- O-d-	06 10 2006
	City	State NJ	Zip Code	Transaction ID: INC:A:24447
	FLANDERS	INU	07836	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENGI	n NEERING & OPS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	520.00	7
	Other (specify)		320.00	7
Г				
6	UBTOTAL of Receipts This Page (optional)			115.00
\vdash	ODITION TO THE CEIPIS THIS Page (optional)			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 41 / 220
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Stator for commercial purposes, other than using the n	itements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) A. STEPHEN HOBSON			Date of Receipt
Mailing Address 1 HERITAGE RD			0 6 1 0 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC:A:24524
FLORHAM PARK	NJ	07932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	650.00	
Full Name (Last, First, Middle Initial) 3. GLENN HOFFMAN			Date of Receipt
Mailing Address 974 HILLCREST ROAD			06 10 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC:A:24594
RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FACII		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		390.00	
Full Name (Last, First, Middle Initial) TIMOTHY HOGAN			Date of Receipt
Mailing Address 9 HIRLE ST			0 6 1 0 / 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:24460
CORNWALL ON HUDSON	NY	12520	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		325.00	
SUBTOTAL of Receipts This Page (optional)			105.00
TOTAL This Period (last nage this line number of	nlv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 42 / 220
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	y information copied from such Reports and Sta	tomente may	y not be cold or used by any perso	
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name of Local Pirot Middle Lettell			1
Α.	Full Name (Last, First, Middle Initial) STEPHEN HOLODAK			Date of Receipt
	Mailing Address 49 S HILLSIDE AVE			M M / D D / Y Y Y Y
				06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24548
	ELMSFORD	NY	10523	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		80.00
	Tederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			RVENTION DELIVERY SYS	<u>T </u>
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify)		1040.00	
		0 0		'
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 1 OLD LANE			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24503
	SCARSDALE	NY	10583	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.	<u> </u>		23.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS	VP TREA	SURY	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	Other (specify)		0 0 0 0 0 0 0	
_	Full Name (Last, First, Middle Initial)			
C.	JANE HULSE			Date of Receipt
	Mailing Address 95 GORDON RD			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24580
	ESSEX FELLS	NJ	07021	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	Name of Employer Occupati		1	\dashv
	Name of Employer MEDCO HEALTH SOLUTIONS	VP FINAI		
			Year-to-Date ▼	
	Primary General	1 1	650.00	
	Other (specify) ▼		000.00	
Г				
s	UBTOTAL of Receipts This Page (optional)			155.00
\vdash	ago (optional)			
Ιт	OTAL This Period (last page this line number or	ılv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 43 / 220
	EMIZED RECEIPTS		or each category of the	(check only one)
TI LIMIZED RECEIL 13			Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	not be sold or used by any perso dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) DAVID ISRAEL			Date of Receipt
	Mailing Address 730 COLUMBUS AVENU	JE		06 10 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24349
	NEW YORK	NY	10025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS DEVELOPMENT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	, , , ,	325.00	
	Other (specify) ▼	0 0	020.00	
— В.	Full Name (Last, First, Middle Initial) SUSAN ITO			Date of Receipt
	Mailing Address 6366 SW 90TH STREET	Ī		0 6 1 0 / 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:24355
	GAINESVILLE	FL	32608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	' '	650.00	
	Other (specify)		1 1 1 1 1 1 1	
<u> </u>	Full Name (Last, First, Middle Initial) TODD JEFFREY			Date of Receipt
-	Mailing Address 15 ELIZABETH STREET	-		M M / D D / Y Y Y Y
				06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24638
	DUMONT	NJ	07628	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 PHAF	n RM CONTRACT & CONSUL	TING
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		325.00	
	Other (specify) ▼		323.00	
1	UBTOTAL of Receipts This Page (optional)			100.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 220 (check only one) X 11a 11b 11c 12
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may ne and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		Zip Code 07661 on FINANCE e 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
3.	MEDOO HE'XI TH SOLLITIONS	State NV C Occupation VP/GM	Zip Code 89052	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 .	MEDCO HEALTH SOLUTIONS	State MN C Occupation DIR CLIE	Zip Code 55372 n ENT & MKT PROG STRAT e 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
s	UBTOTAL of Receipts This Page (optional)		>	70.08
т	OTAL This Period (last page this line number only	v)	>	

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 45	5 / 220
TEMIZED RECEIPTS			or each category of the	(check only one)	10
			Detailed Summary Page		12 16 17
Any	vinformation copied from such Reports and Stator commercial purposes, other than using the na	ements may	not be sold or used by any perso		
		me and add	dress of any political committee to	solicit contributions from such committ	tee.
١.	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)	
٩. ِ	Full Name (Last, First, Middle Initial) BECKY KAUS			Date of Receipt	
	Mailing Address N81 W18359 TOURS DF City	State	Zip Code	06 10 20	0 6
	MENOMONEE FALLS	WI	53051	Transaction ID: INC:A:24468 Amount of Each Receipt this Per	riod
	FEC ID number of contributing federal political committee.	С			5.00
•	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n IICAL SVCS		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00		
3.	Full Name (Last, First, Middle Initial) WILLIAM KEELER			Date of Receipt	
	Mailing Address 63 MOUNTAIN GLEN RO	DAD			0.6
	City	State	Zip Code	Transaction ID: INC:A:24657	
	RINGWOOD	NJ	07456	Amount of Each Receipt this Per	riod
	FEC ID number of contributing federal political committee.	С			5.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		325.00		
	Full Name (Last, First, Middle Initial) WILLIAM KELLEY	_		Date of Receipt	
	Mailing Address 1970 WOODLANDS PL				0 6
	City	State	Zip Code	Transaction ID: INC:A:24518	
	POWELL FOR IT AND A STATE OF THE STATE OF TH	OH	43065	Amount of Each Receipt this Per	riod
	FEC ID number of contributing federal political committee.	C			5.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		625.00		
SL	JBTOTAL of Receipts This Page (optional)		·····	7	5.00
TC	PTAL This Period (last page this line number on	ly)	>		

S	CHEDULE A (FEC Form 3X)		Llac concrete cobadula(a)	FOR LINE NUMBER: PAGE 46 / 220
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•••	EIWIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and ado	rnot be sold or used by any perso fress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
\mathbb{Z}				,
	Full Name (Last, First, Middle Initial)			Data of Danaint
Α.	KEVIN KELLY Mailing Address 251 POPLAR AVE			Date of Receipt
	Walling Address 251 FOFLAR AVE			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24373
	HACKENSACK	NJ	07601	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		23.00
	Name of Employer	Occupation	<u> </u>	-
	Name of Employer MEDCO HEALTH SOLUTIONS		CLIENT SVC DELIVERY	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General	1 1	205.00	
	Other (specify)		325.00	
	E III II I			
В.	Full Name (Last, First, Middle Initial) LISA KETNER			Date of Receipt
	Mailing Address 7 POINT VIEW			M M / D D / Y Y Y Y
				06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24504
	OAKLAND	NJ	07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	rederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			NG & PRODUCT DEV	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	650.00	
	(cpss.,), \	0 0	0 0 0 0 0 0 0	1
_	Full Name (Last, First, Middle Initial)			
C.	KARIN KLEINEGGER			Date of Receipt
	Mailing Address 121 CONKLING TOWN	ROAD		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24628
	CHESTER	NY	10918	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS		T MGMT OPS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	650.00	
	Other (specify)		000.00	
6	JBTOTAL of Receipts This Page (optional)			125.00
\vdash	COLOTAL OF HOCOIPES THIS Lage (optional)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 47 / 220 (check only one)
	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) KENNETH KLEPPER			Date of Receipt
	Mailing Address 295 GLEN PLACE			06 10 2006
	City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC:A:24663 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS		CHIEF OPERATING OFFICE	─ ER
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2499.90	
3.	Full Name (Last, First, Middle Initial) JON KLINE			Date of Receipt
	Mailing Address 36 CORTLAND TL			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24659
	MAHWAH FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period 50.54
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n PLANNING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 657.02	
— Э.	Full Name (Last, First, Middle Initial) BRADFORD KOGEN			Date of Receipt
	Mailing Address 555 FORBUSH STREET			06 10 2006
	City BOONTON	State NJ	Zip Code 07005	Transaction ID: INC:A:24620 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07000	20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n CLIENT RETAIL	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 260.00	
s	UBTOTAL of Receipts This Page (optional)			262.84
T	OTAL This Period (last page this line number on	lv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 48 / 220
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	r 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.
\vdash	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	Medco Health PAC)		
			(d	, , , , , , , , , , , , , , , , , , , ,
_	Full Name (Last, First, Middle Initial)			
Α.	KATHLEEN KORDUCKI			Date of Receipt
	Mailing Address 920 CLARK STREET			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24391
	BOWLING GREEN	OH	43402	Amount of Each Receipt this Period
	FEC ID number of contributing		10102	
	federal political committee.	C		25.00
	·			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		ACCT EXEC Year-to-Date ▼	
	Primary General	Aggregate	: Teal-10-Date V	1
	Other (specify)		265.00	
			0 0 0 0 0 0 0	
	Full Name (Last, First, Middle Initial)			
В.	RODGER KORMYLO			Date of Receipt
	Mailing Address 1310 43RD AVE			0 6 1 0 Y Y Y Y Y Y
	City	State	Zip Code	
	KENOSHA	WI	53144	Transaction ID: INC:A:24475 Amount of Each Receipt this Period
			33144	Amount of Each Receipt this Feriod
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CCT EXEC	
	Receipt For:		Year-to-Date ▼	_
	Primary General	Aggregate	Flear-to-Date V	1
	Other (specify)		325.00	
				4
_	Full Name (Last, First, Middle Initial)			5. (5.)
C.	JOANN KRENITSKY			Date of Receipt
	Mailing Address 143 DEERFIELD TERRA	(CE		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24412
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
			า	_
			BUS PLANNING & ADMIN	
			Year-to-Date ▼	
			205.00	1
	Other (specify)		285.00	
_				
				75.00
Ls	UBTOTAL of Receipts This Page (optional)		<u> </u>	75.00
_	OTAL This Period (last page this line number on	h.A	_	
1 1	VIAL THIS FERIOU HAST DADE THIS THE HUMDER OF	IV /		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LII		UMBER: ne)	PAGI	= 49 / 220)
	EMIZED RECEIPTS		Detailed Summary Page	X 11		11b 14	11c 15	12 16	17
An or	y information copied from such Reports and Statement for commercial purposes, other than using the name ar	ts may	y not be sold or used by any perso dress of any political committee to	n for the p solicit con	urpos tributi	e of solici	iting cont such cor	ributions nmittee.	
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITIC	CAL A	ACTION COMMITTEE (a.k.a	. Medco	Healt	th PAC)			
۹.	Full Name (Last, First, Middle Initial) BARBARA KRZAK			_		eceipt			
	Mailing Address 495 ISLAND WAY			0 (10		2006	
	City Sta FRANKLIN LAKES NJ		Zip Code 07417			on ID: IN			
	FEC ID number of contributing federal political committee.							55.00	
	MEDOO HE'ALTH COLLITIONS	upatio E-CC	n OM STRATEGY & DELIVERY	,					
	Receipt For: Primary General Other (specify) ▼	regate	e Year-to-Date ▼ 550.00						
3.	Full Name (Last, First, Middle Initial) MICHAEL KRZAN			Date	of Re	eceipt			
	Mailing Address 2735 YORK RD				м / 3	10	/ Y	2006	
	City Sta COLUMBUS OF		Zip Code			on ID: IN			
	FEC ID number of contributing federal political committee.	<u>'</u>	43221	Amo	ount of	f Each Re	eceipt this	50.00	
	MEDCO HE'ALTH SOLLITIONS	upatio GION	n AL VP PHARMACIES						
	Receipt For: Primary General Other (specify) ▼	regate	e Year-to-Date ▼ 650.00						
- C.	Full Name (Last, First, Middle Initial) CYNTHIA LAUBACHER			Date	of Re	eceipt			
	Mailing Address 7017 COBALT WAY			м О (м / 3	10	/ Y	2 0 0 6	
	City Sta CITRUS HEIGHTS CA		Zip Code 95621			on ID: IN			
	FEC ID number of contributing federal political committee.		00021		unt or	Laciffic	oceipt tine	100.00	1
	MEDCO HE'ALTH SOLLITIONS	upatio DIR (n GOVERNMENT AFFAIRS						
	Receipt For: Primary General Other (specify) ▼	regate	e Year-to-Date ▼ 1300.00						
S	JBTOTAL of Receipts This Page (optional)							205.00	
т	OTAL This Period (last page this line number only)								

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 50 / 220		
ITEMIZED RECEIPTS			or each category of the	(check only one)		
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12		
_			.1. 11. 11	13 14 15 16 17		
Ar	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and ado	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)					
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	. Medco Health PAC)				
			,	,		
	Full Name (Last, First, Middle Initial)			B		
Α.	ROBERT LONG			Date of Receipt		
	Mailing Address 18 HARLIND TERRACE			06 10 2006		
	City State		Zip Code	Transaction ID: INC:A:24497		
	RAMSEY	NJ	07446	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		25.00		
	Name of Employer	Occupation	า	_		
	Name of Employer MEDCO HEALTH SOLUTIONS		CT EXEC			
	Receipt For:	l	Year-to-Date ▼			
	Primary General		005.00	1		
	Other (specify)	0 0	325.00			
R	Full Name (Last, First, Middle Initial) DEBRA LUDGATE			Date of Receipt		
٥.	Mailing Address 238 WOODLAND AVE			M M / D D / Y Y Y Y		
				06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24462		
	SUMMIT	NJ	07901	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		25.00		
	federal political committee.					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1			
	MEDCO HEALTH SOLUTIONS	SR DIR C	CREATIVE SVCS			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General	' '	325.00	1		
	Other (specify)	0 0	320.00	J		
_	Full Name (Last, First, Middle Initial)					
C.	CHERYL MACDONALD			Date of Receipt		
	Mailing Address 15011 EAGLEPARK PLA	ACE		M M / D D / Y Y Y Y		
	Cit.	01-1-	7in Ondo	06 10 2006		
	City LITHIA	State FL	Zip Code	Transaction ID: INC:A:24542		
		FL	33547	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
				_		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
			CS REQUIREMENTS • Year-to-Date ▼			
	Primary General	Aggregate	Flear-to-Date V	1		
	Other (specify)		325.00			
_						
		75.00				
s	UBTOTAL of Receipts This Page (optional)			75.00		
Г						
I T	OTAL This Period (last page this line number on	lv)				

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X)			11	FOR LINE NUMBER: PAGE 51 / 220		
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)		
11	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12		
	o information and information Boundary and Ob		and be really as a real for a second second	13 14 15 16 17		
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	rnot be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
\angle	E. III Norman (Londo Elizab Milabella Lattice)					
Α.	Full Name (Last, First, Middle Initial) KENNETH MALLEY			Date of Receipt		
	Mailing Address 764 W. SADDLE RIVER	ROAD		M M / D D / Y Y Y Y		
				06 10 2006		
	City HO HO KUS	State NJ	Zip Code	Transaction ID: INC:A:24449		
		INJ	07423	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Francisco					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROF	1 DUCT & CHANNEL MKTING			
	Receipt For:		Year-to-Date ▼	<u>`</u>		
	Primary General		650.00	1		
	Other (specify) ▼		650.00			
_	Full Name (Last, First, Middle Initial)					
В.	MICHAEL MANDAGLIO			Date of Receipt		
	Mailing Address 33 HICKORY TAVERN RD			M M / D D / Y Y Y Y		
	City	State	Zip Code	06 10 2006		
	GILLETTE	NJ	07933	Transaction ID: INC:A:24357 Amount of Each Receipt this Period		
	FEC ID number of contributing		07333			
	federal political committee.	C		50.00		
	Name of Employer	Occupation	1	-		
	Name of Employer MEDCO HEALTH SOLUTIONS	VP FINAI				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify)		650.00			
	Cities (specify)	0 0	0 0 0 0 0 0 0			
_	Full Name (Last, First, Middle Initial)			1		
C.	TAMARA MARSHALL Mailing Address W144 N7150 TERRACE			Date of Receipt		
	Mailing Address W144 N7150 TERRACE		06 10 2006			
	City	State	Zip Code	Transaction ID: INC:A:24464		
	MENOMONEE FALLS	WI	53051	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		25.00		
	rederal political committee.					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
	SR N		. ACCT EXEC Year-to-Date ▼	\dashv		
	Primary General	7.99.094.0		1		
	Other (specify) ▼		325.00			
_				<u> </u>		
	UBTOTAL of Receipts This Page (optional)			125.00		
\vdash	ODITAL OF DECEMPLS THIS Page (optional)					
Т	OTAL This Period (last page this line number or	nly)		. [

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 52 / 220
ITEMIZED RECEIPTS		or each category of the	(check only one)	
••	LIMIZED RECEIL TO		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	NITION!	10TION 00M WITTER ()	M
	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
^	Full Name (Last, First, Middle Initial)			Data of Descript
Α.	TODD MARTIN Mailing Address 11825 SHEPPARDS CF	ROSSING		Date of Receipt
				06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24431
	CLARKSVILLE	MD	21029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
	Receipt For:	·	Year-to-Date ▼	
	Primary General		0400.00	
	Other (specify) ▼		2499.90	
— В.	Full Name (Last, First, Middle Initial) ROBERT MATCHETT			Date of Receipt
	Mailing Address 27 LAKEVILLE RD			0 6 1 0 / 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:24400
	SUSSEX	NJ	07461	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	1 HNOLOGY	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		325.00	
	Other (specify)	0 0	020.00	
<u> </u>	Full Name (Last, First, Middle Initial) JEFFREY MAY			Date of Receipt
	Mailing Address 137 WASHINGTON AV	E		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24597
	HILLSDALE	NJ	07642	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer	Occupation	1	
	Name of Employer MEDCO HEALTH SOLUTIONS		G DISTRIB & CONTROL	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	2499.90	
	Other (specify) ▼			
s	UBTOTAL of Receipts This Page (optional)			409.60
H			······································	
T	OTAL This Period (last page this line number or	nly)	>	

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)		
Full Name (Last, First, Middle Initial) A. PATRICIA MAZZONE Mailing Address 56 PENOBSCOT ST			Date of Receipt		
City CLIFTON	State NJ	Zip Code 07013	Transaction ID: INC:A:24502 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General		PRODUCT SVCS Year-to-Date ▼ 325.00	1		
Other (specify) ▼ Full Name (Last, First, Middle Initial) DANIEL MCCRONE Mailing Address 41 HENRY COURT			Date of Receipt 0 6 1 0 2 0 0 6		
City MOUNT ARLINGTON FEC ID number of contributing federal political committee.	State NJ	Zip Code 07856	Transaction ID: INC:A:24687 Amount of Each Receipt this Period 50.00		
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP OPS Aggregate	Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) C. THOMAS MCDONALD Mailing Address 0-45 27TH ST			Date of Receipt M M D D Y Y Y Y Y Y Y Y		
City FAIR LAWN FEC ID number of contributing	State NJ	Zip Code 07410	Transaction ID: INC:A:24549 Amount of Each Receipt this Period 25.00		
Receipt For: Primary Other (specify) ▼	Occupation DIR TEC	n HNOLOGY • Year-to-Date ▼			
SUBTOTAL of Receipts This Page (optional) .			100.00		

TOTAL This Period (last page this line number only)

3	, NEDOULE A CEEC, ECHIII 3A)			FOR LINE NUMBER: PAGE 54 / 220		
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		(check only one)		
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page		X 11a 11b 11c 12		
			Detailed Suffiffially Fage	13 14 15 16 17		
An	y information copied from such Reports and State for commercial purposes, other than using the i	atements may	not be sold or used by any pers	on for the purpose of soliciting contributions		
Or		name and add	aress or any pontical committee to	5 SOIICIT CONTINUITIONS FROM SUCH COMMITTEE.		
	NAME OF COMMITTEE (In Full)		OTION COMMITTEE ()	· Martin Health BAO)		
\angle	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) COLLEEN MCINTOSH			Date of Receipt		
	Mailing Address 87 ROSELAWN RD			0 6 1 0 2 0 0 6		
	City	State	Zip Code	Transaction ID: INC:A:24505		
	HIGHLAND MILLS	NY	10930	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		116.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation COUNSE				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		1508.00			
	Other (specify)	0 0	1000.00			
— В.	Full Name (Last, First, Middle Initial) STEVEN MCNAMARA			Date of Receipt		
	Mailing Address 112 GREEN TERRACE	M M / D D / Y Y Y Y				
	<u></u>			06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24635		
	WEST MILFORD	NJ	07480	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		192.31		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
			SINESS OPS			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		2500.03			
	Other (specify) ▼	0 0		_		
<u> </u>	Full Name (Last, First, Middle Initial) DAVID MILLER			Date of Receipt		
	Mailing Address 7 CLOVER LANE			M M / D D / Y Y Y Y		
				06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24361		
	RANDOLPH	NJ	07869	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABC	n DR RELATIONS			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		335.00	7		
	Other (specify) ▼	0 0	325.00	1		
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	(D			333.31		
S	JBTOTAL of Receipts This Page (optional)					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) KAREN MILLER Mailing Address 14 ANDERSON RD City WHARTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07885 n FINANCE e 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
3.	Full Name (Last, First, Middle Initial) GIOVANNI MINARDI Mailing Address 12 LINCOLN ROAD City KINNELON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	L	Zip Code 07405 n E-COM STRAT & DELI e Year-to-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
C.	Full Name (Last, First, Middle Initial) BHUPESH MISTRY Mailing Address 106 HAMBURG ROAD City PARSIPPANY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07054 n CAL SPECIALIST e Year-to-Date ▼	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)		·····	80.00
т	OTAL This Period (last page this line number or	ılv))	

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 56 / 220		
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)		
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
			, ,	13 14 15 16 17		
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements may	not be sold or used by any person	n for the purpose of soliciting contributions		
<u>~</u>	NAME OF COMMITTEE (In Full)	arro arro acc	aroco or arry political committee to	Collect Collections from Cash Collections		
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)		
	WEDGO HEALTH GOLOTIONS INC. I	JEITIONE 7	to non committee (a.n.a.	Wedge Flediti 1770)		
_	Full Name (Last, First, Middle Initial)					
Α.	PETER MONKHOUSE			Date of Receipt		
	Mailing Address 1320 BRONCO CIR			06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24446		
	WARRINGTON	PA	18976	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		25.00		
	Name of Family as	10				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	EFIT DELIVERY SYSTEMS			
	Receipt For:		Year-to-Date ▼	-		
	Primary General	, iggi ogaio				
	Other (specify) ▼	1	225.00			
	Full Name (Last, First, Middle Initial)			D (D		
В.				Date of Receipt		
	Mailing Address 86 WELLINGTON AVENUE			06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24350		
	SHORT HILLS	NJ	07078	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		50.00		
	Name of Employer	Occupation	า	-		
	Name of Employer MEDCO HEALTH SOLUTIONS		PUTY GENERAL COUNSEL			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		050.00			
	Other (specify) ▼		650.00			
C.	Full Name (Last, First, Middle Initial) RICHARD MOUNTJOY			Date of Receipt		
•	Mailing Address 2 STONEBRIDGE RD			M M / D D / Y Y Y Y		
				06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24629		
	SPARTA	NJ	07871	Amount of Each Receipt this Period		
	FEC ID number of contributing	C		20.00		
	federal political committee.	<u> </u>				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	<u> </u>	7		
	MEDGO HEALTH SOLUTIONS	SR NATL	ACCT EXEC			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		260.00			
	Other (specify)		200.00			
_	l					
_	UDTOTAL of Develop This Day of the D			95.00		
L	UBTOTAL of Receipts This Page (optional)		······			
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 57 / 220
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
		, 0	13 14 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) KEVIN MURPHY Mailing Address 105 COVENTRY I N			Date of Receipt
			06 10 2006
City TRUMBULL	State CT	Zip Code 06611	Transaction ID: INC:A:24389 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 875.00	
Full Name (Last, First, Middle Initial) BECKY NAGLE			Date of Receipt
Mailing Address 64 WALTER AVE	06 10 7 2006		
City	State	Zip Code	Transaction ID: INC:A:24390
HASBROUCK HEIGHTS FEC ID number of contributing	NJ	07604	Amount of Each Receipt this Period
federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CLINICAL SVCS	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		325.00	
Full Name (Last, First, Middle Initial) C. ARTHUR NARDIN			Date of Receipt
Mailing Address 28 POWDERHORN DR			M M / D D / Y Y Y Y
City	State	Zip Code	0 6 1 0 2 0 0 6 Transaction ID: INC:A:24599
KINNELON	NJ	07405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHA	n ARMACEUTICAL CONTRAC	TING
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2496.00	
SUBTOTAL of Receipts This Page (optional)			292.00
TOTAL This Period (last page this line number on	ly))	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 58 / 220		
ITEMIZED RECEIPTS			or each category of the	(check only one)		
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				13 14 15 16 17		
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and ado	rnot 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)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	DITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)		
			(4	, , , , , , , , , , , , , , , , , , , ,		
Full Name (Last, First, Middle Initial)						
Α.	A. HAIK NOVSHADIAN			Date of Receipt		
	Mailing Address 45 DAVIS ROAD			06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24467		
	SPARTA	NJ	07871	Amount of Each Receipt this Period		
	FEC ID number of contributing		07071			
	federal political committee.	C		26.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation				
	Pagaint For:		OM STRAT & DELIV			
	Receipt For: Primary General	Ayyreyate	e Year-to-Date ▼	1		
	Other (specify)		338.00			
	Full Name (Last, First, Middle Initial)					
В.	CHARLES OESTREICHER			Date of Receipt		
	Mailing Address 6 PARK DR SOUTH			0 6 1 0 Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:24619		
	RYE	NY	10580	Amount of Each Receipt this Period		
			10000	Amount of Lacif Neceipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	·					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	ո M STRATEGY & DELIVER՝	,		
	Receipt For:		Year-to-Date ∇			
	Primary General	Aggregate	Flear-to-Date V	1		
	Other (specify) ▼		650.00			
_	Full Name (Last, First, Middle Initial)			5. (5.)		
C.	MELVIN OHL			Date of Receipt		
	Mailing Address 274 E FRANKLIN TPKE			06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24573		
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		50.00		
	Name of Employer	Occupation	า	_		
Name of Employer MEDCO HEALTH SOLUTIONS			CUREMENT & INVENTORY			
			Year-to-Date ▼			
	Primary General		050.00	1		
	Other (specify)	0 0	650.00			
_						
		126.00				
Ls	UBTOTAL of Receipts This Page (optional)		······	120.00		
_	OTAL This Period (last page this line number or	alv)				
1 1	VIAL THIS FERIOU HAST DAUG THIS THE HUMBER OF	IIV)				

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 59 / 220
ITEMIZED RECEIPTS			or each category of the	(check only one)	
•••	LIMIZED RECEIL 13		Detailed Summary Page	X 11a 11b	11c 12
Δ				13 14	15 16 17
or	y information copied from such Reports and St for commercial purposes, other than using the	name and add	frict be sold of used by any perso dress of any political committee to	solicit contributions from	such committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
			(-,	
	Full Name (Last, First, Middle Initial)				
Α.	CLAUDINE OLSEN			Date of Receipt	
	Mailing Address 4 HIGHGATE CT			06 10	
	City	State	Zip Code	Transaction ID: IN	
	SUFFERN	NY	10901	Amount of Each Re	
	FEC ID number of contributing			7 tillount of Edolf Fit	
	federal political committee.	C			25.00
				_	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
	Receipt For:		ACCT MGMT Year-to-Date ▼		
	Primary General	Aggregate	rear-to-Date V	1	
	Other (specify)		325.00		
				1	
	Full Name (Last, First, Middle Initial)				
В.	ALEXANDER ONIK			Date of Receipt	
	Mailing Address 1 SCHINDLER CT			0 6 1 0	
	City	State	Zip Code		
	UPPER SADDLE RIVER	NJ	07458	Transaction ID: IN	
		INU	07436	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
			CAL SPECIALIST		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		225.00		
	care (opening)	0 0	0 0 0 0 0 0 0	1	
_	Full Name (Last, First, Middle Initial)				
C.	NATALYA ONIK			Date of Receipt	
	Mailing Address 1 SCHINDLER CT			0 6 1 0	
	City	State	Zip Code	Transaction ID: IN	
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Re	
	FEC ID number of contributing		1 1 1 1 1 1	7 tillount of Eucli 11	
	federal political committee.	C			25.00
	Name of European	Occupation			
			n CAL SPECIALIST		
	Receipt For:		Year-to-Date V	_	
	Primary General	riggrogato	Tour to Bute V	1	
	Other (specify) ▼		325.00		
				1	
s	UBTOTAL of Receipts This Page (optional)		75.00		
				-	
т	OTAL This Period (last page this line number of	only)	>		

S	CHEDULE A (FEC Form 3X)		Llea caparata cabadula(c)	FOR LINE NUMBER: PAGE 60 / 220
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) LUDIVINA PACAMARRA			Date of Receipt
	Mailing Address 4 TEAK COURT	06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24561
	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 DI	1 R TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1	650.00	
	Other (specify) ▼			J
— В.	Full Name (Last, First, Middle Initial) DAWN PAGANO			Date of Receipt
	Mailing Address 185 PASCACK ROAD	06 10 / 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:24560
	PARK RIDGE	NJ	07656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	, , , ,	500.00	1
	Other (specify)			J
<u> </u>	Full Name (Last, First, Middle Initial) MICHELE PAIGE			Date of Receipt
	Mailing Address 12 MILLBROOK COURT	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:24480
	LIVINGSTON	NJ	07039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR N	MARKET STRATEGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		205.00	1
	Other (specify) ▼		325.00]
	LIPTOTAL of Descripts This Descriptor II			125.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 61 / 220
IT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Ar	ny information copied from such Reports and Sta	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		OTION COMMITTEE ()	14 1 11 11 516)
\angle	MEDCO HEALTH SOLUTIONS INC. PO	JLITICAL A	CHON COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MICHAEL PETEROY			Date of Receipt
	Mailing Address 18 MOUNTAIN VIEW C	Т		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24544
	RIVERDALE	NJ	07457	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	DUCT DEVELOPMENT	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	325.00	1
	Other (specify)	0 0		
В.	Full Name (Last, First, Middle Initial) THOMAS PETTYES			Date of Receipt
	Mailing Address 8522 UPLAND LN NOR	TH		M M / D D / Y Y Y Y
	City	06 10 2006		
	MAPLE GROVE	State MN	Zip Code 55311	Transaction ID: INC:A:24425 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			L MGR GROUP	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼	0 0	390.00	
<u> </u>	Full Name (Last, First, Middle Initial) JUDITH PLATKIN			Date of Receipt
	Mailing Address 29 BLACKWELL 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:24358
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	650.00	
	☐ Other (specify) ▼	0 0		1
s	UBTOTAL of Receipts This Page (optional)			105.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 62 / 220						
	EMIZED RECEIPTS		or each category of the	(check only one)						
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				13 14 15 16 17						
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may ame and ado	r 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)									
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)						
			(33							
	Full Name (Last, First, Middle Initial)			B . (B						
Α.				Date of Receipt						
	Mailing Address 5 CRABAPPLE CT			06 10 2006						
	City	State	Zip Code	Transaction ID: INC:A:24428						
	MONSEY	NY	10952	Amount of Each Receipt this Period						
	FEC ID number of contributing									
	federal political committee.	C		25.00						
	Name of Employer	Occupation	า	_						
	Name of Employer MEDCO HEALTH SOLUTIONS		INESS REQUIREMENTS							
	Receipt For:		Year-to-Date ▼							
	Primary General	1 1		1						
	Other (specify)		325.00							
R	Full Name (Last, First, Middle Initial) KARIN PRINCIVALLE			Date of Receipt						
υ.	Mailing Address 875 ALEXANDRIA CT			M M / D D / Y Y Y Y						
	Walling Address 0/3 ALEXANDITIA 01			06 10 2006						
	City	State	Zip Code	Transaction ID: INC:A:24490						
	RAMSEY	NJ	07446	Amount of Each Receipt this Period						
	FEC ID number of contributing	С		192.30						
	federal political committee.			102.00						
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1							
	MEDCO HEALTH SOLUTIONS	SVP HR								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General	1 1	2499.90	1						
	Other (specify)	1 1	2-55.50							
_	Full Name (Last, First, Middle Initial)									
C.	ROBERT PRITCHET			Date of Receipt						
	Mailing Address 135 HOLLYBERRY DRI	VΕ		M M / D D / Y Y Y						
	City HOPEWELL JUNCTION			06 10 2006						
			Zip Code	Transaction ID: INC:A:24589						
			12533	Amount of Each Receipt this Period						
MEDCO HEALTH SOLUTIONS DIR (C		25.00						
		Occupation								
			ITRACT ADMINISTRATION	_						
		Aggregate	e Year-to-Date ▼							
	Other (specify)	' '	325.00							
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s	UBTOTAL of Receipts This Page (optional)			242.30						
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 63 / 220
ITEMIZED RECEIPTS			or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICALA	ACTION COMMITTEE (a.k.a.	Madeo Health PAC)
_	WILDOO FILALTH SOLUTIONS INC. PO	LITIOAL F	TO HON COMMINITIEE (a.K.a.	iviedo Health PAO)
۹.	Full Name (Last, First, Middle Initial) MARK PROULX			Date of Receipt
	Mailing Address 20 BRANDY RIDGE ROA	AD		0 6 1 0 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24653
	SPARTA	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHA	n ARMACY & CUST SVC OPS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1300.00	
3.	Full Name (Last, First, Middle Initial) THERESA RAFKIN			Date of Receipt
	Mailing Address 50 GLORIA DRIVE City Sta			06 10 YYYYY 2006
			Zip Code	Transaction ID: INC:A:24508
	ALLENDALE FEC ID number of contributing	NJ	07401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	Full Name (Last, First, Middle Initial) 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	State	Zip Code	Transaction ID: INC:A:24671
	KELLER	TX	76248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)		······	135.00
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T	OTAL This Period (last page this line number onl	ly)	>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 64 / 220					
	· · · · · · · · · · · · · · · · · · ·		Use separate schedule(s) or each category of the	(check only one)					
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12					
			2 staned Sammary 1 age	13 14 15 16 17					
Ar	y information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions					
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)					
Α.	Full Name (Last, First, Middle Initial) FRANCES RAO			Date of Receipt					
	Mailing Address 146 JOHNSON RD			0 6 1 0 2 0 0 6					
	City	State	Zip Code	Transaction ID: INC:A:24374					
	SCARSDALE	NY	10583	Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	C		25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F							
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General		005.00	1					
	Other (specify)		325.00						
В.	Full Name (Last, First, Middle Initial) JOANN REED			Date of Receipt					
	Mailing Address 4 ANTLER CT			M M / D D / Y Y Y Y					
	-			06 10 2006					
	City	State	Zip Code	Transaction ID: INC:A:24579					
	MATAWAN	NJ	07747	Amount of Each Receipt this Period					
	FEC ID number of contributing	C		65.38					
	federal political committee.	0							
	Name of Employer	Occupation	n	_					
	Name of Employer MEDCO HEALTH SOLUTIONS		ANCE & CHIEF FIN OFFCR						
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General		040'04	1					
	Other (specify) ▼		849.94						
_	Full Name (Last, First, Middle Initial)			Data of Dagaint					
C.	THOMAS REINCKENS Mailing Address 22 BARTLETT AVE.			Date of Receipt					
	Walling Address 22 BARTLETT AVE.			06 10 2006					
	City	State	Zip Code	Transaction ID: INC:A:24444					
	NORWALK	CT	06850	Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	C		25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS		n NNCE	7					
			ANCE	_					
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,					
	Other (specify)		225.00						
	☐ Other (Specify) ▼			1					
_	UDTOTAL (D. 11 THE D. 11 THE			115.38					
Ls	UBTOTAL of Receipts This Page (optional)								

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 65 / 220					
	` '	Use separate schedule(s)		(check only one)					
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		X 11a 11b 11c 12					
				13 14 15 16 17					
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	not be sold or used by any persol dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.					
\setminus	NAME OF COMMITTEE (In Full)								
\rangle	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)					
Α.	Full Name (Last, First, Middle Initial) JOSEPH REYNOLDS			Date of Receipt					
	Mailing Address 412 RIVER MEWS LAN	NE		06 10 2006					
	City	State	Zip Code	Transaction ID: INC:A:24668					
	EDGEWATER	NJ	07020	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		70.00					
	Name of Employer MEDCO HEALTH SOLUTIONS		R TECHNOLOGY						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 910.00						
— В.	Full Name (Last, First, Middle Initial) DAVID ROBARGE			Date of Receipt					
	Mailing Address 4565 QUEENSLAND L	N N		0 6 1 0 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:24399					
	MINNEAPOLIS	MN	55446	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		25.00					
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL SVCS						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00]					
<u> </u>	Full Name (Last, First, Middle Initial) SORAYA RODRIGUEZ-BALZAC			Date of Receipt					
	Mailing Address 22 PAPOOSE TRAIL			0 6 1 0 / Y Y Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: INC:A:24667					
	ANDOVER	NJ	07821	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 PUB	n LIC AFFAIRS						
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General Other (specify) ▼		325.00						
s	UBTOTAL of Receipts This Page (optional)			120.00					
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	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 66 / 220 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ements may me and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	LITICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) MICHAEL ROMANZO			Date of Receipt
	Mailing Address 96 LEHMANN STREET			06 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC:A:24442
	FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period 50.00
	MEDCO HEALTH SOLUTIONS		NT SYSTEMED Year-to-Date ▼	
	Receipt For: Primary General Other (specify) ▼	Aggregate	650.00	
3.	Full Name (Last, First, Middle Initial) DONNA ROSEN			Date of Receipt
	Mailing Address 7 RED OAK LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC:A:24590 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07400	50.00
	MEDOO HE'AI TH SOLLITIONS	Occupation VP OPS-	CLINICAL TECH	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
).	Full Name (Last, First, Middle Initial) RICHARD RUBINO			Date of Receipt
Mailing Address 3103 RIO VISTA DRIVE				0 6 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC:A:24586 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
MEDCO DEXITE SOLLITIONS		Occupation SVP & Co	n ONTROLLER	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		1105.00	
s	UBTOTAL of Receipts This Page (optional)			185.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 67 / 220 (check only one)							
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abla	NAME OF COMMITTEE (In Full)										
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)							
Α.	Full Name (Last, First, Middle Initial) STEVEN RUSSEK			Date of Receipt							
	Mailing Address 21 SKY TOP RIDGE			06 10 2006							
	City	State	Zip Code	Transaction ID: INC:A:24459							
	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 FORM	n MULARY & COVERAGE MG	MT							
	Receipt For:	Aggregate	e Year-to-Date ▼								
	Primary General		650.00	1							
	Other (specify) ▼		650.00								
_											
В.	Full Name (Last, First, Middle Initial) MARY RYAN			Date of Receipt							
	Mailing Address 456 RICHMOND AVENU	06 10 7 2006									
	City	State	Zip Code	Transaction ID: INC:A:24578							
	MAPLEWOOD	NJ	07040	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		78.34							
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	_							
	MEDICO HEALTH SOLUTIONS	VP COR	P REGULATORY AFFAIRS								
	Receipt For:	Aggregate	e Year-to-Date ▼								
	Primary General		1010 10	1							
	Other (specify) ▼		1018.42								
_	Full Name (Last, First, Middle Initial)										
C.	CYNTHIA RYLANDS			Date of Receipt							
	Mailing Address 4836 MIDDLE RD			06 10 2006							
	City	State	Zip Code	Transaction ID: INC:A:24607							
	ALLISON PARK	PA	15101	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	25.00									
	Name of Employer MEDCO HEALTH SOLUTIONS		n INESS REQUIREMENTS	7							
	Receipt For:	Aggregate	e Year-to-Date ▼								
	Primary General	1 1		1							
	Other (specify) ▼		225.00								
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6	UBTOTAL of Receipts This Page (optional)			153.34							
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SCHEDULE A (FEC Form 3X)			Llea coparata cabadula(s)	FOR LINE NUMBER: PAGE 68 / 220						
	EMIZED RECEIPTS	Use separate schedule(s) or each category of the		(check only one)						
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۸۰	y information copied from such Reports and Sta	otomonto mov	r not be cold or used by any nore	13 14 15 16 17						
or	for commercial purposes, other than using the i	name and add	lress of any political committee to	o solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)									
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)						
A.	Full Name (Last, First, Middle Initial) MICHAEL SARDONE			Date of Receipt						
	Mailing Address 7 AHERN WAY			06 10 2006						
	City	State	Zip Code	Transaction ID: INC:A:24477						
	WEST ORANGE	NJ	07052	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		25.00						
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR T	TECHNOLOGY							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		325.00							
— В.	Full Name (Last, First, Middle Initial) DAVID SCHLETT			Date of Receipt						
	Mailing Address 339 GRAMERCY PL			06 10 2006						
	City	State	Zip Code	Transaction ID: INC:A:24585						
	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 VP ANAL	n YTICAL SVCS							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼	0 0	650.00							
<u> </u>	Full Name (Last, First, Middle Initial) FRANK SCHULTE			Date of Receipt						
	Mailing Address 2121 AMERICA'S CUP	CIR		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:24438						
	LAS VEGAS	NV	89117	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS		C		8.92						
		Occupation VP/GM	1							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 223.00							
s	UBTOTAL of Receipts This Page (optional)			83.92						
T	OTAL This Period (last page this line number o	only)								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions			
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) ALLEN SCHWARTZ Mailing Address 3556 DAVIS City EVANSTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 60203 n R CLINICAL SVCS e 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			
3.	Full Name (Last, First, Middle Initial) JEFFREY SCOTT Mailing Address 7330 EVEREST LANE - N City	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
MAPLE GROVE FEC ID number of contributing federal political committee. MN C			55311	Amount of Each Receipt this Period 25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		oct exec e Year-to-Date ▼				
D .	Full Name (Last, First, Middle Initial) LEONARD SCOTT Mailing Address 2300 MCCUE ROAD - St		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City HOUSTON FEC ID number of contributing federal political committee.	State TX	Zip Code 77056	Transaction ID: INC:A:24519 Amount of Each Receipt this Period 25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		A ACCT MGMT P Year-to-Date ▼ 325.00				
S	UBTOTAL of Receipts This Page (optional)			75.00			
T	OTAL This Period (last page this line number onl	v)					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 70 / 220 (check only one)						
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An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.						
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)						
۸.	Full Name (Last, First, Middle Initial) ROBERT SENDEWICZ			Date of Receipt						
	Mailing Address 1220 CROSSING WAY			06 10 2006						
	City WAYNE	State NJ	Zip Code 07470	Transaction ID: INC:A:24377 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	25.00						
	Name of Employer MEDCO HEALTH SOLUTIONS	•	TECHNOLOGY							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00							
3.	Full Name (Last, First, Middle Initial) THOMAS SHANAHAN			Date of Receipt						
	Mailing Address 266 BRUSHY CREEK AV	06 10 2006								
	City	State	Zip Code	Transaction ID: INC:A:24501						
LAS VEGAS NV FEC ID number of contributing federal political committee.			89148	Amount of Each Receipt this Period 28.85						
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS								
	Receipt For: Primary General Other (appoint)	Aggregate	Year-to-Date ▼							
	Other (specify) ▼	0 0	0 0 0 0 0 0 0							
Э.	Full Name (Last, First, Middle Initial) JOHN SHEA			Date of Receipt						
	Mailing Address 62 FRANKLIN TURNPIKE	Ξ		06 10 2006						
	City	State	Zip Code	Transaction ID: INC:A:24364						
	ALLENDALE FEC ID number of contributing federal political committee.	NJ C	07401	Amount of Each Receipt this Period 40.00						
MEDCO DEM TO COLLITIONS		Occupation ASST CC								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 520.00							
s	UBTOTAL of Receipts This Page (optional)		·····	93.85						
T	OTAL This Period (last page this line number onl	v)	>							

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SCHEDULE A (FEC Form 3X)					FOR LINE NUMBER: PAGE 71 / 220							
	`		Use separate schedule(s) or each category of the		(check only one) X 11a 11b 11c 12							
11	EMIZED RECEIPTS		Detailed Summary Page				1b		11c	12		
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Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and ado	r not be sold or used by any perso Iress of any political committee to	on for solic	the purp it contrib	oose coutions	ot soli s fror	icitir n su	ig contr ich con	ibutior nmittee	ns) .	
	NAME OF COMMITTEE (In Full)											\exists
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	a. Me	dco He	alth	PAC	;)				
\angle												\Box
Α.	Full Name (Last, First, Middle Initial) FRANK SHEEHY				Date of	f Rece	eint					
	Mailing Address 119 HAMILTON RD						D I	D /	Υ	YY	Υ	
					0 6	J L	1	-		200	6	
	City	State	Zip Code		Transa							
	RIDGEWOOD	NJ	07450	-	Amoun	t of Ea	ach F	Rece	eipt this	Perio	d	1
	FEC ID number of contributing federal political committee.	C								50.	00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		1300.00	1								
	Other (specify) ▼	1 1	1000.00	_								
— В.	Full Name (Last, First, Middle Initial) PETER SHERMAN				Date of	f Rece	eipt					_
	Mailing Address 139 GATES AVENUE					7/		D /	Υ	YY		
	0"		0 6		_1			200	6			
	City MONTCLAIR	State NJ	Zip Code		Transa						.1	_
		INJ	07042	\dashv	Amoun	IT OT E	acn F	Rece	ept this	Period	3	1
	FEC ID number of contributing federal political committee.	C								50.	00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation										
			NG COUNSEL	_								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	٠.								
	Other (specify) ▼		650.00									
												_
C.	Full Name (Last, First, Middle Initial) ELWOOD SIDES III				Date of	f Rece	eipt					
	Mailing Address 150 CLAREMONT AVE				ММ	/	D I I		Υ	7		
	City	State	Zip Code		0 6 Transa	_ L	_1 ID: I		٠Δ٠24	200 113	0	
	LONG BEACH	CA	90803									_
	FEC ID number of contributing	С	90803 Amount of Each Receipt this P					25.		1		
	federal political committee.										L	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE										
	Receipt For:											
	Primary General	eral										
Other (specify) ▼			325.00									
_												_
_	INDICAL of December This December 1									125.	00	
L	UBTOTAL of Receipts This Page (optional)		······	<u> </u>	-	1 1	-	-			-	1

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 220 (check only one) X 11a 11b 11c 12
Δn	y information copied from such Reports and State	mente may		n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) JEFFREY SIMEK Mailing Address 197 OXFORD RD			Date of Receipt
		<u> </u>		06 10 2006
	City CHESTER	State NY	Zip Code 10918	Transaction ID: INC:A:24485 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13010	192.31
	MEDCO HEALTH SOLUTIONS		IC AFFAIRS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2500.03	
3.	Full Name (Last, First, Middle Initial) LEE SIMON			Date of Receipt
	Mailing Address 2390 GREENVIEW ROAL	D		0 6 1 0 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:24630
NORTHBROOK IL		<u>IL</u>	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	MEDCO HE'ALTH SOLLITIONS	Occupation GENERA	n NL MGR GROUP	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	650.00	
).	Full Name (Last, First, Middle Initial) JEFFREY SINKO			Date of Receipt
	Mailing Address 10 CHERRY TREE LANE			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: INC:A:24513
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
MEDOO HE'NI TH COLUTIONS		Occupation COUNSE		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 325.00	
s	UBTOTAL of Receipts This Page (optional)			267.31
T	OTAL This Period (last page this line number only	v)		

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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 73 / 220
	•		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and ado	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.
\setminus	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) WILLIAM SIRICO			Date of Receipt
	Mailing Address 564 DALE COURT EAS	T		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24375
	RIVER VALE	NJ	07675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		390.00	
	Other (specify)	0 0	0 0 0 0 0 0 0	.1
В.	Full Name (Last, First, Middle Initial) DAVID SITVER			Date of Receipt
	Mailing Address 24 YORKSHIRE AVE			0 6 1 0 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24472
	SUFFERN	NY	10901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	HNOLOGY	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		261.00	1
	Other (specify)	0 0	201.00	
— С.	Full Name (Last, First, Middle Initial) ANN SMITH			Date of Receipt
	Mailing Address 437 GLENDALE RD			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: INC:A:24476
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS			
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		225.00	1
	Other (specify) ▼		325.00	
s	UBTOTAL of Receipts This Page (optional)			86.00
\vdash				-

COLLEGE A (FEO Farma OV)		1		FOR LINE NUMBER: PAGE 74 / 220
5	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	
			Detailed Summary Page	
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ROBERT SMITH			Date of Receipt
	Mailing Address 40 JOSHUA DR T			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24605
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	1	7
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify) ▼		1300.00	
В.	Full Name (Last, First, Middle Initial) DAVID SNOW			Date of Receipt
	Mailing Address 23 CEDAR GATE ROAL	M M / D D / Y Y Y		
		06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24660
	DARIEN	CT	06820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer	Occupation	2	\dashv
	Name of Employer MEDCO HEALTH SOLUTIONS		AN & CEO	
	Receipt For:		Year-to-Date V	-
	Primary General	Ayyreyale	real-to-bate V	,
	Other (specify)	' '	2500.03	
	Ciriei (Specify)	1 1		J.
_	Full Name (Last, First, Middle Initial) ALAN SOKALER			Date of Receipt
J .	Mailing Address 30 MICHELLE WAY			M M / D D / Y Y Y Y
	Walling Address 30 MICHELLE WAY			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24681
	PINE BROOK	NJ	07058	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07000	40.00
	Name of Company	10		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL		
	Pagaint For:			_
	Receipt For:	Aggregate	Year-to-Date ▼	,
Primary General			520.00	
	Other (specify)	1 1	320.00	1
_				
				282.31
S	UBTOTAL of Receipts This Page (optional)			. 202.31
\vdash				-

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 75 / 220
	•		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		X 11a 11b 11c 12
			Detailed Gairlinary Fage	13 14 15 16 17
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any person	on for the purpose of soliciting contributions a solicit contributions from such committee.
<u></u>	NAME OF COMMITTEE (In Full)		noo or any pontoar committee to	
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) RALPH STAIANO			Date of Receipt
	Mailing Address 32 ALDEN RD			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24360
	MONROE	NY	10950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		BUSINESS REQUIREMENT	S
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼	0 0	325.00	
В.	Full Name (Last, First, Middle Initial) CHRISTOPHER STATEN			Date of Receipt
	Mailing Address 7 FOREST LAKE DR			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:24588
	WEST HARRISON	NY	10604	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	325.00	
<u> </u>	Full Name (Last, First, Middle Initial) JILL STEARNS			Date of Receipt
	Mailing Address 13130 HALSELL DR			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:24632
	AUSTIN	TX	78732	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	CCT EXEC	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00]
<u>-</u>	UBTOTAL of Receipts This Page (optional)			75.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 76 / 220
ITEMIZED RECEIPTS			or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	n for the purpose of soliciting contributions solicit contributions from such committee.		
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) CRAIG STEEL			Date of Receipt
	Mailing Address 122 DEMAREST AVENU	E		0 6 1 0 / 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:24432
	EMERSON	NJ	07630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC		
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General Other (specify) ▼	0 0	325.00	
3.	Full Name (Last, First, Middle Initial) SUSAN STEELE			Date of Receipt
	Mailing Address 501 CONTINENTAL DR			06 10 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24699
	SAGAMORE HILLS	OH	44067	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	325.00	
<u> </u>	Full Name (Last, First, Middle Initial) AMY STEINKELLNER			Date of Receipt
	Mailing Address 1740 HIGHLAND DRIVE			0 6 1 0 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:24465
	ELM GROVE	WI	53122	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
Receipt For: Aggregat			CAL SVCS	
			Year-to-Date ▼	
	Primary General Other (specify) ▼		650.00	
S	UBTOTAL of Receipts This Page (optional)		·····	100.00
т,	OTAL This Period (last nage this line number only	v)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 77 / 220 (check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) GLEN STETTIN Mailing Address 8 MILL GLEN 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:24649
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
			CLIN & THERAP SOL GRO	UP
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
3.	Full Name (Last, First, Middle Initial) SCOTT STRATTON			Date of Receipt
	Mailing Address 351 TIMBERLANE DRIVE	0 6 1 0 / 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:24688
	ORANGE	<u>CT</u>	06477	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	MEDCO HEALTH SOLUTIONS		DUCT DEVELOPMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
- C.	Full Name (Last, First, Middle Initial) PATRICIA STRETE			Date of Receipt
	Mailing Address 19275 PAVER BARNES I	ROAD		0 6 1 0 7 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:24394
	MARYSVILLE	OH	43040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	MEDCO LEXITLI SOLLITIONS	Occupation DIR CLIN	n IICAL THERAPEUTICS	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 325.00	
S	UBTOTAL of Receipts This Page (optional)			175.00
T	OTAL This Period (last page this line number only	v)		

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 78 / 220
	•		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			2 otaliou Gariiria, r ago	13 14 15 16 17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and ado	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.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) COLEEN SULLIVAN			Date of Receipt
	Mailing Address 38 BARKMILL TERRAC	E		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24631
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		PRODUCT DEVELOPMENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00]
— В.	Full Name (Last, First, Middle Initial) CYNTHIA SULLIVAN			Date of Receipt
	Mailing Address 21 DENISE DRIVE			06 10 / Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24587
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL	n NCIAL PLANNING	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		650.00	
<u> </u>	Full Name (Last, First, Middle Initial) MARK SULLIVAN			Date of Receipt
	Mailing Address 821 SUMMIT CT			0 6 1 0 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24362
	MANAKIN SABOT	VA	23103	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 CS S	n SYSTEMS PLAN & IMPLEM	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00]
s	UBTOTAL of Receipts This Page (optional)			100.00
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 220 (check only one) X 11a 11b 11c 12
_				13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and ado	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) MEDGO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) IRENE SUTTON Mailing Address 374 KINGSTON CT			Date of Receipt
			7' 0 1	06 10 2006
	WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC:A:24410 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	•	rechnology	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
3.	Full Name (Last, First, Middle Initial) TIMOTHY SWETT			Date of Receipt
	Mailing Address 8362 GOLDEN PRAIRIE	0 6 1 0 / Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:24440
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		685.00	
<u> </u>	Full Name (Last, First, Middle Initial) MARY THORSBY			Date of Receipt
	Mailing Address 17326 ELLEN DR			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:24456
	LIVONIA	MI	48152	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR S	n SPECIAL MARKETS	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 850.00	
S	UBTOTAL of Receipts This Page (optional)			150.00
т	OTAL This Period (last page this line number on	v)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 80 / 220
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
Full Name (Last, First, Middle Initial)			
A. WILLIAM TOBIN Mailing Address 838 COLONIAL RD			Date of Receipt
Mailing Address 838 COLONIAL RD			06 10 2006
City	State	Zip Code	Transaction ID: INC:A:24369
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 ▼ 650.00	
Full Name (Last, First, Middle Initial) 6. CLAUDIA TUCKER			Date of Receipt
Mailing Address 713 INDIAN CREEK RD	06 10 / 2006		
City AMHERST	State VA	Zip Code	Transaction ID: INC:A:24511
FEC ID number of contributing		24521	Amount of Each Receipt this Period
federal political committee.	C		75.00
MEDOO HE'ALTH SOLLITIONS	Occupation SR DIR (n GOVERNMENT AFFAIRS	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify)		975.00	
Full Name (Last, First, Middle Initial) C. GARY TULLY			Date of Receipt
Mailing Address 16 FIELDHEDGE DRIVE			0 6 1 0 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:24637
HILLSBOROUGH	NJ	08844	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS		NT SVC DELIVERY	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify) ▼		325.00	
SUBTOTAL of Receipts This Page (optional)		•	150.00
TOTAL This Period (last page this line number only	y)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 81 / 220
	EMIZED RECEIPTS		or each category of the	(check only one)
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Ai	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and ado	rnot 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)		, , , , , , , , , , , , , , , , , , ,	
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a k a	Medco Health PAC)
			(4	, , , , , , , , , , , , , , , , , , , ,
	Full Name (Last, First, Middle Initial)			
A.	-			Date of Receipt
	Mailing Address 31 LINCOLN RD			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24451
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing		07100	
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		LYTICAL SVCS • Year-to-Date ▼	_
	Primary General	Aggregate	: Teal-10-Date V	1
	Other (specify)		275.00	
			0 0 0 0 0 0 0	1
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address W328 S4230 SPRING R	IDGE		0 6 1 0 Y Y Y Y Y Y Y
	City	State	Zip Code	
	WAUKESHA	WI	53188	Transaction ID: INC:A:24700 Amount of Each Receipt this Period
			33100	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACCT		
	Receipt For:		Year-to-Date V	_
	Primary General	Aggregate	FIGAL-10-Date V	1
	Other (specify)		290.00	
_	Full Name (Last, First, Middle Initial)			2. (2.)
C.	NICHOLAS VASILOPOULOS			Date of Receipt
	Mailing Address 105 ARRANDALE RD			0 6 1 0 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24499
	ROCKVILLE CENTRE	NY	11570	Amount of Each Receipt this Period
	FEC ID number of contributing	С		
	Name of Employer			50.00
			<u> </u>	
			NG	
			Year-to-Date ▼	7
	Primary General		250.00	1
	Other (specify)		650.00	
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				95.00
S	UBTOTAL of Receipts This Page (optional)			93.00
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9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 82 / 220
	•	Use separate schedule(s)		(check only one)
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		X 11a 11b 11c 12
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Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any personers of any political committee to	on for the purpose of soliciting contributions
<u>~</u>	NAME OF COMMITTEE (In Full)	Tarrio aria ade	proces of any political committee to	o conort contributions from each committee.
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) GORDON VICKERS			Date of Receipt
	Mailing Address 436 MOUNTAIN AVENI	JE		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24348
	WESTFIELD	NJ	07090	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼	0 0	325.00	
В.	Full Name (Last, First, Middle Initial) DONALD VIDIC			Date of Receipt
	Mailing Address 611 REDWOOD CT			0 6 1 0 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24507
	CRANBERRY TOWNSHIP	PA	16066	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n PHARM OPS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	240.00	
<u> </u>	Full Name (Last, First, Middle Initial) MUNISH VIJ			Date of Receipt
	Mailing Address 2108 HENRY COURT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24675
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	325.00	
s	UBTOTAL of Receipts This Page (optional)			70.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 83 / 220
	EMIZED RECEIPTS		or each category of the	(check only one)
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or	ny information copied from such Reports and Star for commercial purposes, other than using the na	ame and add	y not be sold or used by any person dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) DANIEL WALDEN			Date of Receipt
	Mailing Address 450 BEECHMONT DR			06 10 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24563
	NEW ROCHELLE	NY	10804	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP REC	n GULATORY & MC PROGRA	MS
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	, · ·	2500.03	
	Other (specify)			
— В.	Full Name (Last, First, Middle Initial) WILLIAM WALLACE			Date of Receipt
	Mailing Address 5445 GOODWIN AVENU	JE		06 10 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24677
	DALLAS	TX	75206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE	n ES SEGMENT LEADER	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	' '	2500.03	
	Other (specify)			
<u> </u>	Full Name (Last, First, Middle Initial) CALVIN WASDYKE			Date of Receipt
	Mailing Address 5 APPLE ORCHARD RD)		M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: INC:A:24515
	MOORESTOWN	NJ	08057	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:		e Year-to-Date ▼	1
	Primary General			1
	Other (specify) ▼	0 0	312.50	
S	UBTOTAL of Receipts This Page (optional)			397.12
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or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and ado	r not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) CATHERINE WASSON			Date of Receipt
	Mailing Address 26072 HARBOR VIEW			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24371
	CAPISTRANO BEACH	CA	92624	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 NATL		
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General			1
	Other (specify) ▼	1	650.00	
				4
В.	Full Name (Last, First, Middle Initial) KELLY WEBBER			Date of Receipt
	Mailing Address 107 UPPER SADDLE R	M M / D D / Y Y Y Y		
		06 10 2006		
	City	State	Zip Code	Transaction ID: INC:A:24494
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	
	MEDCO HEALTH SOLUTIONS	VP CORE	P HR	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General	1 1		1
	Other (specify) ▼	1	650.00	
C.	Full Name (Last, First, Middle Initial) TIMOTHY WENTWORTH			Date of Receipt
	Mailing Address 309 WATERVIEW DR			0 6 1 0 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24420
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	V/41/	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n EO ACCREDO	
	Receipt For:	· · · · · · · · · · · · · · · · · · ·	Year-to-Date ▼	-
	Primary General	, iggi egale	Tour to Duto ¥	1
	Other (specify)		2500.03	
	Caron (opcomy) 🔻	0 0	0 0 0 0 0 0 0	1
_				292.31
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 85 / 220 (check only one)			
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Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) KENNETH WERMES			Date of Receipt		
	Mailing Address 26037 N WRANGLER R			06 10 / 2006		
	City	State	Zip Code	Transaction ID: INC:A:24488		
	SCOTTSDALE	AZ	85255	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		75.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify)		975.00			
	Other (specify)		0 0 0 0 0 0 0			
В.	Full Name (Last, First, Middle Initial) PETER WHITE			Date of Receipt		
	Mailing Address 2241 E. PINCHOT AVE. #17F			06 10 / Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC:A:24363		
	PHOENIX	AZ	85016	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		20.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		260.00			
	Other (specify)					
<u> </u>	Full Name (Last, First, Middle Initial) CHRISTOPHER WILSON			Date of Receipt		
	Mailing Address 1 RIVER COURT APARTMENT 2809			0 6 1 0 / 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:24473		
	JERSEY CITY	NJ	07310	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 CONS	n SULT SUPPORT			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		650.00			
	Other (specify) ▼		000.00			
Г						
s	UBTOTAL of Receipts This Page (optional)			145.00		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 86 / 220			
	•	Use separate schedule(s) or each category of the		(check only one)			
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Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any pers	on for the purpose of soliciting contributions			
or	for commercial purposes, other than using the	name and add	iress of any political committee to	solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)		OTION COMMITTEE ()	· Marchael Harlin BAO)			
\angle	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	i. Medco Health PAC)			
A.	Full Name (Last, First, Middle Initial) BEVERLY WINKLER			Date of Receipt			
	Mailing Address 17 LYNWOOD RD			06 10 2006			
	City	State	Zip Code	Transaction ID: INC:A:24584			
	VERONA	NJ	07044	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C		7			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General	-	325.00	7			
	Other (specify)	0 0	323.00	1			
— В.	Full Name (Last, First, Middle Initial) MARILYN WOLLETT			Date of Receipt			
	Mailing Address 8174 MT AIR PL			M M / D D / Y Y Y Y			
	0::	0	7: 0 1	06 10 2006			
	COLUMBUS	State	Zip Code	Transaction ID: INC:A:24523			
	COLUMBUS	ОН	43235	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	RM PRACTICE	7			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General	1 1	625.00	7			
	Other (specify)		625.00				
<u> </u>	Full Name (Last, First, Middle Initial) ANNA WONG			Date of Receipt			
	Mailing Address 64-20 BELL BLVD			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:24673			
	BAYSIDE	NY	11364	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 INSU	n RED SOLUTIONS				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General		650.00	1			
	Other (specify)		030.00	1			
S	UBTOTAL of Receipts This Page (optional)			100.00			
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 87 / 220
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or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
\angle			· 	
۸	Full Name (Last, First, Middle Initial) JUDITH WOOD			Date of Receipt
Α.	Mailing Address 76 COLONIAL ROAD			M M / D D / Y Y Y Y
	Maining / Idai 666 / 70 OOLONIAL NOAD			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24624
	STILLWATER	NY	12170	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	 1	
	MEDCO HEALTH SOLUTIONS		ACCT MGMT	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		325.00	1
	Other (specify)	0 0	323.00	
	Full Name /Leat First Middle Initial)			
В.	Full Name (Last, First, Middle Initial) JORDAN WOUK			Date of Receipt
	Mailing Address 554 CUMBERLAND AV	E		M M / D D / Y Y Y Y
				06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24644
	TEANECK	NJ	07666	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Tederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		_	HNOLOGY	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		325.00	
	cane. (opeca.y) 🔻	0 0		
_	Full Name (Last, First, Middle Initial)			
C.	SERGEY YANITSKIY			Date of Receipt
	Mailing Address 793 LINCOLN AVE			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24406
	POMPTON LAKES	NJ	07442	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer	Occupation	<u> </u>	_
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST	
	Receipt For:	-	Year-to-Date ▼	_
	Primary General		205.00	1
	Other (specify)		325.00	
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				75.00
S	UBTOTAL of Receipts This Page (optional)			70.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 88 / 220
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or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and ado	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)		71	
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	DITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
			(4	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
_	Full Name (Last, First, Middle Initial)			
Α.	SARAH YINGLING			Date of Receipt
	Mailing Address 901 ST MARKS AVE			06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24481
	WESTFIELD	NJ	07090	Amount of Each Receipt this Period
			07000	
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:		DUCT MGMT Year-to-Date ▼	_
	Primary General	Aygregate	: Teal-to-Date V	1
	Other (specify)		325.00	
		0 0	0 0 0 0 0 0 0	1
	Full Name (Last, First, Middle Initial)			
В.	DANIEL ZELEM			Date of Receipt
	Mailing Address 219 SPOOK ROCK RD.			0 6 1 0 Y Y Y Y Y Y
	City	State	Zip Code	
	SUFFERN	NY	10901	Transaction ID: INC:A:24547 Amount of Each Receipt this Period
			10301	Amount of Lacif Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-CO		
	Receipt For:	l	Year-to-Date ▼	-
	Primary General	Aggregate	Teal to Bate V	
	Other (specify)		650.00	
				'
_	Full Name (Last, First, Middle Initial)			2. (2.)
C.	JILL ZELMAN	.O. DI		Date of Receipt
	Mailing Address 43604 EMERALD DUNE	S PL		06 10 2006
	City	State	Zip Code	Transaction ID: INC:A:24601
	LEESBURG	VA	20176	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		25.00
	Name of Employer	Occupation	า	-
	Name of Employer MEDCO HEALTH SOLUTIONS		ISOLIDATION PLAN & RPR	Τ
			Year-to-Date ▼	7
	Primary General		007.00	
	Other (specify) ▼	0 0	267.28	
				100.00
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16	l ₁₇
Ar or	y information copied from such Reports and Stater for commercial purposes, other than using the name	ments may ne and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions	.,
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
A.	MEDCO HEALTH SOLUTIONS	State NJ C Occupation ASST CC		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
3.	CHRONIS H. MANOLIS Mailing Address 15 FLORENCE DRIVE City PITTSBURGH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS, INC.		Zip Code 15220 IT MANAGER B Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
C.	MEDCO HEALTH SOLUTIONS		Zip Code 89074 n NEFIT DELIVERY SYSTEMS 9 Year-to-Date ▼ 580.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
s	UBTOTAL of Receipts This Page (optional)		>	350.00	7
Т	OTAL This Period (last page this line number only	·)	>		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 90 / 220
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Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of solicit solicit contributions from s	ing contributions such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		71		
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) KENNETH DANIELS			Date of Receipt	
	Mailing Address 2903 CHUKKAR COURT	Ī		06 17	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24890
	PLANT CITY	<u>FL</u>	33567	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	١		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		625.00		
	Other (specify) ▼	0 0	023.00		
3.	Full Name (Last, First, Middle Initial) ROBBIN DICESARE			Date of Receipt	
	Mailing Address 1003T HIGH STREET			06 / 17	2006
	City	State	Zip Code	Transaction ID: IN	
	BURLINGTON TOWNSHI	NJ	08016	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			9.28
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR MGR	1 TECHNOLOGY		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		232.00		
).	Full Name (Last, First, Middle Initial) WILLIS DINGLE			Date of Receipt	
	Mailing Address 17826 ARBOR GREENE	DR		06 17	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24780
	TAMPA	FL	33647	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR H			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		625.00		
s	UBTOTAL of Receipts This Page (optional)				59.28
			•		
Т	OTAL This Period (last page this line number on	ly)	>		

SCHEDULE A (FEC Form 3X)			l la a a su a vata a a la alvila (a)	FOR LINE NUMBER: PAGE 91 / 220			
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)			
11	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12			
			, ,	13 14 15 16 17			
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions			
Oi		arrie ariu auc	aress or any political committee to	Solicit Contributions from Such Committee.			
	NAME OF COMMITTEE (In Full)	NITIONI A	ACTION COMMITTEE (- I	Madaa Haalib DAO)			
/	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)			
<u>/</u>	Full Name (Last, First, Middle Initial)						
A.				Date of Receipt			
	Mailing Address 908 EDGEMEER LANE			M M / D D / Y Y Y Y			
	0"		7' 0 1	06 17 2006			
	City	State	Zip Code	Transaction ID: INC:A:24997			
	SOUTHLAKE	TX	76092	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		34.45			
	federal political committee.						
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	า	7			
	MEDGO HEALTH SOLUTIONS	VP/GM					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		861.25				
	Other (specify) ▼		001.20				
	Full Name (Last First Middle Initial)						
В.	Full Name (Last, First, Middle Initial) JOSEPH FRENDO			Date of Receipt			
	Mailing Address 9 GREEN HILL TRAIL			M M / D D / Y Y Y Y			
				06 17 2006			
	City	State	Zip Code	Transaction ID: INC:A:24896			
	TROPHY CLUB	TX	76262	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		50.00			
	federal political committee.	<u> </u>		30.00			
	Name of Employer	Occupation	1	7			
	Name of Employer MEDCO HEALTH SOLUTIONS	VP/GM					
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General		4050.00	1			
	Other (specify)		1250.00				
C.	Full Name (Last, First, Middle Initial) RICHARD JONES			Date of Receipt			
٥.	Mailing Address 12 WADE HAMPTON TI	2ΔΙΙ		M M / D D / Y Y Y Y			
	TE WADE HAWI TON H	IAIL		06 17 2006			
	City	State	Zip Code	Transaction ID: INC:A:24954			
	HENDERSON	NV	89052	Amount of Each Receipt this Period			
	FEC ID number of contributing			15.08			
	federal political committee.	C		13.00			
	Name of Employer	Occupation	 1	┪			
	Name of Employer MEDCO HEALTH SOLUTIONS	VP/GM	•				
	Receipt For:		e Year-to-Date ▼				
	Primary General			1			
	Other (specify) ▼		377.00				
_							
				00.52			
s	UBTOTAL of Receipts This Page (optional)		······	99.53			

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SCHEDULE A (FEC Form 3X)					FOR LINE NUMBER: PAGE 92 / 220							
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(ch	(check only one)							
II EMIZED RECEIPTS			Detailed Summary Page	X	X 11a 11b 11c 12							
				<u> </u>	13		14		15	<u> </u>		17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and ado	r not be sold or used by any perso Iress of any political committee to	on for t solicit	the purp t contrib	ose o oution	of sol is fror	n su	g cont ch con	ibution imittee	s	
\setminus	NAME OF COMMITTEE (In Full)											
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Med	dco He	alth	PAC	;)				
Α.	Full Name (Last, First, Middle Initial) WILLIAM KELLEY				Date of	Rece	eipt					
	Mailing Address 1970 WOODLANDS PL				06	/	D 1	7 [/]	Y	^y 2 0 0		
	City	State	Zip Code	٦ ٦	Transa	ction	ID:	NC:	A:248	373		
	POWELL	ОН	43065	_	Amoun	t of E	ach F	Rece	ipt this	Period	ł	
	FEC ID number of contributing federal political committee.	C								25.	00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 625.00									
— В.	Full Name (Last, First, Middle Initial) GILBERT RAINES				Date of	Rece	eipt					
	Mailing Address 800 SANDY TRAIL			06 17 2006								
	City	Zip Code	1	Transaction ID: INC:A:25028								
	KELLER	TX	76248	-	Amoun	t of E	ach F	Rece	ipt this	Period	ł	
	FEC ID number of contributing federal political committee.	С								10.	00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		250.00									
<u> </u>	Full Name (Last, First, Middle Initial) FRANK SCHULTE				Date of	Rece	eipt					
	Mailing Address 2121 AMERICA'S CUP CIR				м м 06	1	D 1		Y	y y 200		
	City	State	Zip Code	٦,	Transa	ction	ID:	NC:	A:24	795		
	LAS VEGAS	NV	89117		Amoun	t of E	ach F	Rece	ipt this	Period	t	_
	FEC ID number of contributing federal political committee.								8.	92		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	ו									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 223.00									
s	UBTOTAL of Receipts This Page (optional)		>				•			43.	92]

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 93 / 220 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\angle	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) THOMAS SHANAHAN			Date of Receipt
	Mailing Address 266 BRUSHY CREEK A	VE		06 17 2006
	City	State	Zip Code	Transaction ID: INC:A:24858
	LAS VEGAS	NV	89148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.85
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		490.45	
	Other (specify)			
В.	Full Name (Last, First, Middle Initial) TIMOTHY SWETT			Date of Receipt
	Mailing Address 8362 GOLDEN PRAIRIE	DRIVE		0 6 1 7 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:24797
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:		e Year-to-Date ▼	
	Primary General		685.00	
	Other (specify)	0 0	003.00	
_	Full Name (Last, First, Middle Initial)			
C.	CALVIN WASDYKE			Date of Receipt
	Mailing Address 5 APPLE ORCHARD RD)		06 17 2006
	City	State	Zip Code	Transaction ID: INC:A:24870
	MOORESTOWN	NJ	08057	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	, ,	312.50	
	Other (specify) ▼	0 0		
s	UBTOTAL of Receipts This Page (optional)			91.35
1	. 5 (1 /		· · · · · · · · · · · · · · · · · · ·	

Ç/	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 94/220
			Use separate schedule(s)	(check only one)	
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b	11c 12
			Detailed Summary Fage	13 14	15 16 17
An	y information copied from such Reports and Stat	ements may	not be sold or used by any perso	n for the purpose of solicit	ng contributions
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from s	uch committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
/			•	,	
	Full Name (Last, First, Middle Initial)				
۹.	MARILYN WOLLETT			Date of Receipt	
	Mailing Address 8174 MT AIR PL			0 6 1 7	2006
	011	01-1-	7'- 0-1-		
	City	State	Zip Code	Transaction ID: IN	
	COLUMBUS	OH	43235	Amount of Each Rec	eipt this Period
	FEC ID number of contributing	С			25.00
	federal political committee.				
	Name of Employer	Occupation	า		
	Name of Employer MEDCO HEALTH SOLUTIONS		RM PRACTICE		
	Receipt For:		Year-to-Date ▼		
	Primary General	199.79			
	Other (specify) ▼	l	625.00		
	Full Name (Last, First, Middle Initial)				
3.	LUCILLE ACCETTA			Date of Receipt	
	Mailing Address 11 ANDOVER CT			M M / D D	/ Y Y Y Y
				06 24	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24792
	CORTLANDT MANOR	NY	10567	Amount of Each Red	eipt this Period
	FEC ID number of contributing				25.00
	federal political committee.	C			25.00
	Name of European	0 1' -	_		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
			SALES & NATL ACCTS	_	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)	' '	325.00		
	Other (specify)				
	Full Name (Last, First, Middle Initial)				
Э.	EDWARD ADAMCIK			Date of Receipt	
	Mailing Address 1021 SUNSET RIDGE			M M / D D	/ Y Y Y Y
				06 24	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24724
	BRIDGEWATER	NJ	08807	Amount of Each Red	ceipt this Period
	FEC ID number of contributing				50.00
	federal political committee.	C			50.00
		0 11			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		FILE	
			RM CONTRACT & CONSUL		
	Receipt For:	Aggregate	Year-to-Date ▼	. [
	Primary General		650.00		
	Other (specify) ▼		1 1 1 1 1 1 1 1		
_	UDTOTAL (D. 11. TV D. 11. T				100.00
s	UBTOTAL of Receipts This Page (optional)		<u> </u>		100100
					
T	OTAL This Period (last page this line number on	ly)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 95 / 220 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) STEPHEN ADLER			Date of Receipt
	Mailing Address 139 BELLVALE LAKES R	D		06 24 7 2006
	City WARWICK	State NY	Zip Code 10990	Transaction ID: INC:A:24774 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	MEDOO HE'ALTH SOLLITIONS	Occupation	TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
3.	Full Name (Last, First, Middle Initial) MARENE ALLISON			Date of Receipt
	Mailing Address 4405 WISMER ROAD			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25049
	DOYLESTOWN FEC ID number of contributing federal political committee.	PA C	18901	Amount of Each Receipt this Period 35.00
	MEDOO HE'ALTH SOLLITIONS	Occupatior VP SECU	ı JRITY & ASSET PROTECTION	DN
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 455.00	
 C.	Full Name (Last, First, Middle Initial) JAMES ALLOCCO			Date of Receipt
	Mailing Address 146 JOHNSON RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City SCARSDALE	State NY	Zip Code 10583	Transaction ID: INC:A:24827
	FEC ID number of contributing federal political committee.	C	10363	Amount of Each Receipt this Period 25.00
	MEDOO HE'NI TH COLUTIONS	Occupation VP INFO	TECHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
s	UBTOTAL of Receipts This Page (optional)		·····	110.00
т.	OTAL This Period (last page this line number only	<i>γ</i>)		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 96 / 220
ITEMIZED RECEIPTS	or each category of the	(check only one) X 11a 11b 11c 12
-	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used by any person e and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
MEDCO HEALTH SOLUTIONS INC. POLIT	FICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) A. TEJWANSH ANAND		Date of Receipt
Mailing Address 10 WHIPPOORWILL LAKE	ROAD	0 6 2 4 2 0 0 6
City	State Zip Code	Transaction ID: INC:A:25024
CHAPPAQUA I	NY 10514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		50.00
MEDOO HE'NI TH COLLITIONS	ccupation P INFO TECHNOLOGY	
Receipt For: A	ggregate Year-to-Date ▼	
Primary General Other (specify) ▼	650.00	
Full Name (Last, First, Middle Initial) 3. ROGER ANDERSON		Date of Receipt
Mailing Address 833 OXFORD COURT		06 24 2006
•	State Zip Code	Transaction ID: INC:A:25044
LEWISVILLE	TX 75056	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		192.30
MEDOO HE'ALTH SOLLITIONS	ccupation VP & CHIEF PHARMACIST	
	ggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1219.20	
Full Name (Last, First, Middle Initial) 2. JAYME ANTONOPLOS		Date of Receipt
Mailing Address 417 MILLS COURT		0 6 2 4 2 0 0 6
,	State Zip Code	Transaction ID: INC:A:24889
FLORHAM PARK I	NJ 07932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25.00
MEDOO HE'NI TH COLLITIONS	ccupation IR EXEC CORR	
	ggregate Year-to-Date ▼	
Primary General Other (specify) ▼	325.00	
SUBTOTAL of Receipts This Page (optional)		267.30
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC F	orm 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 97 / 220 (check only one)
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such For for commercial purposes, other t	Reports and Statements may han using the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Fu MEDCO HEALTH SOLUTI	,	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Ir DAVID ARCISZEWSKI	nitial)		Date of Receipt
Mailing Address 20 CHADW	/ELL PLACE		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:24841
MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	S Occupation ASST CC		
Receipt For: Primary General		e Year-to-Date ▼	
Other (specify)	0 0	325.00	
Full Name (Last, First, Middle Ir	nitial)		Date of Receipt
Mailing Address 80 N. WOO	DDLAND STREET		06 24 2006
City	State	Zip Code	Transaction ID: INC:A:24968
ENGLEWOOD	NJ	07631	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 PROF	n POSAL UNIT	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		325.00	
Full Name (Last, First, Middle Ir	nitial)		Date of Receipt
Mailing Address 69 SKYLIN	IE DR		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:24901
UPPER SADDLE RIVER FEC ID number of contributing	NJ	07458	Amount of Each Receipt this Period
federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	1 TECHNOLOGY	
Receipt For: Primary General		e Year-to-Date ▼	
Other (specify)		370.00	
SUBTOTAL of Receipts This Pag	ge (optional)		100.00
	* * * *	•	_

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 98 / 220	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12	
				13 14 15 16 17	
Ar or	ly information copied from such Reports and Stator commercial purposes, other than using the n	itements may lame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
\angle				,	
Α.	Full Name (Last, First, Middle Initial) MICHAEL BARONE			Date of Receipt	
Α.	Mailing Address 452 MEDWAY RD			M M / D D / Y Y Y Y	
	432 WEDVAT TO			06 24 2006	
	City	State	Zip Code	Transaction ID: INC:A:25055	
	HIGHLAND HEIGHTS	OH	44143	Amount of Each Receipt this Period	
	FEC ID number of contributing			250.00	
	federal political committee.	C		230.00	
	Name of Employer	Occupation	 1	-	
	Name of Employer MEDCO HEALTH SOLUTIONS	GENERA			
	Receipt For:	Aggregate	Year-to-Date ▼	7	
	Primary General		2050.00		
	Other (specify)		3250.00		
В.	Full Name (Last, First, Middle Initial) BRENDA BASSETT			Date of Receipt	
٠.	Mailing Address 1752 BLACKSTONE DF	RIVE		M M / D D / Y Y Y Y	
	1,02 BE/(0101010101			06 24 2006	
	City	State	Zip Code	Transaction ID: INC:A:24967	
	CARROLLTON	TX	75007	Amount of Each Receipt this Period	
	FEC ID number of contributing	C		50.00	
	federal political committee.	<u> </u>			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7	
	MEDCO HEALTH SOLUTIONS	VP NATL	. ACCTS		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		650.00		
	Other (specify)				
_	Full Name (Last, First, Middle Initial)			+	
C.	DAVID BAUGH			Date of Receipt	
	Mailing Address 1813 ADONIS AVE			M M / D D / Y Y Y Y	
			7. 0	06 24 2006	
	City	State	Zip Code	Transaction ID: INC:A:25014	
	HENDERSON	NV	89074	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		5.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
			NEFIT DELIVERY SYSTEMS	ٵ	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
Primary General Other (specify) ▼			580.00		
				'	
s	UBTOTAL of Receipts This Page (optional))	305.00	
\vdash					
Ιт	OTAL This Period (last page this line number of	nlv)			

91	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 99 / 220
	,		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Guillinary Fage	13 14 15 16 17
Ar	ly information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) PETER BEGANS			Date of Receipt
	Mailing Address 1605 CHARNITA CT			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24865
	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		ERNMENT AFFAIRS	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		1300.00	
		1 1		4
В.	Full Name (Last, First, Middle Initial) STEPHEN BELL			Date of Receipt
	Mailing Address 24 GLENWOOD ROAD)		M M / D D / Y Y Y Y
	Cit.	04-4-	7:- Oada	06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25027
	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	Occupation VP FINAL		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	650.00	1
	Other (specify) ▼	0 0	000.00	1
<u> </u>	Full Name (Last, First, Middle Initial) ROBERT BENSON			Date of Receipt
	Mailing Address 304 BERKSHIRE 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:24899
	NEW MILFORD	NJ	07646	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BENE	THE STATE OF THE S	
	Receipt For:	-	Year-to-Date ▼	_
	Primary General	33. 233.0		1
	Other (specify) ▼		650.00	
			<u> </u>	
s	UBTOTAL of Receipts This Page (optional)			200.00
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
<u>/</u> _3.	Full Name (Last, First, Middle Initial) FLOYD BILLINGS Mailing Address 4273 BROGDAN FARM (City BUFORD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) City Mailing Address 4 WINDRUSH LANE City WESTPORT FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	State GA C Occupation Aggregate State CT C Occupation GROUP	Zip Code 06880 PRES, EMPLOYER GROUP	Date of Receipt M M
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2496.00	
-	Full Name (Last, First, Middle Initial) JONATHAN BLAUMAN Mailing Address 50 NEW ENGLAND DR City RAMSEY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07446 07446 n CLIENT & MKT PROG STRA e 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
s	UBTOTAL of Receipts This Page (optional)		······	242.00
т	OTAL This Period (last page this line number on	v)	>	

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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 101 / 220 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	
				X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) KENNETH BODMER			Date of Receipt
	Mailing Address 15 WEISS DR			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24941
	TOWACO	NJ	07082	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	n VP FINANCE	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		650.00	
В.	Full Name (Last, First, Middle Initial) MICHAEL BOGDA			Date of Receipt
	Mailing Address 80 LEONA CT			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25016
	LEVITTOWN	NY	11756	Amount of Each Receipt this Period
	FEC ID number of contributing			05.00
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			CAL SPECIALIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		325.00	1
	Other (specify)		323.00	
_	Full Name (Last, First, Middle Initial)			B. (B.)
C.	JOSEPH BOTTA			Date of Receipt
	Mailing Address 109 ARBOR PL			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24758
	BRYN MAWR	PA	19010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		7
	Receipt For:		e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	1	325.00	
				4
١	UBTOTAL of Receipts This Page (optional)			100.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 102 / 220
ITEMIZED RECEIPTS			or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	y information copied from such Reports and State	mente may	y not be cold or used by any nerco	
or	for commercial purposes, other than using the nar	ne and add	lress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. POL	ITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
\angle	E. III N. Land (Land Eliza Medilla 1994)			
Α.	Full Name (Last, First, Middle Initial) SALLIE BOWDEN			Date of Receipt
	Mailing Address 5259 FISHERCREST LN			M M / D D / Y Y Y Y
				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24973
	RICHMOND	VA	23231	Amount of Each Receipt this Period
	FEC ID number of contributing	С		200.00
	federal political committee.			
	MEDOO HE'XI TH SOLLITIONS	Occupation		
			MULARY CONSULTING	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	2600.00	
	and (openly) V	0 0		'
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 15 DAWN LANE			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25010
	RINGWOOD	NJ	07456	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		30.00
	Name of Employer	Occupation	1	-
	MEDCO HE'ALTH SOLLITIONS		ILTH MGMT	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	390.00	
	Other (specify)		000.00	
_	Full Name (Last, First, Middle Initial)			+
C.	PATRICIA BRANUM			Date of Receipt
	Mailing Address 210 FROG HOLLOW RO	AD		0 6 2 4 2 0 0 6
	PO BOX 708	State	Zip Code	
	COATESVILLE	PA	19320	Transaction ID: INC:A:24963 Amount of Each Receipt this Period
	FEC ID number of contributing		10020	
	federal political committee.	C		75.00
	Name of Employer	Occupation	`	-
	MEDOO HE'XI TH SOLLITIONS		& PROCESS ENGINEERIN	G
	Receipt For:		Year-to-Date ▼	1
Primary General		-	000.00	
	Other (specify) ▼		800.00	
_	INDICAL of Descints This Days (setting)			305.00
S	UBTOTAL of Receipts This Page (optional))	
_	OTAL This Period (last page this line number only	/)		

SCHEDULE A (FEC Form 3X)

PAGE 103 / 220 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) A. DAVID BREEN Date of Receipt Mailing Address 27 SEALS DR 06 24 2006 City State Zip Code Transaction ID: INC:A:24942 **MONROE** NY 10950 Amount of Each Receipt this Period FEC ID number of contributing 25.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR ANALYTICAL SVCS Aggregate Year-to-Date ▼ Receipt For: Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** KENNETH BROWN Date of Receipt Mailing Address 540 GIORDANO DRIVE 0 6 24 2006 City Zip Code State Transaction ID: INC:A:24755 YORKTOWN HEIGHTS NY 10598 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP BUSINESS REQUIREMENTS Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) C. VIVIAN BULGER Date of Receipt Mailing Address 120 EAST MAIN ST 06 24 2006 Citv State Zip Code Transaction ID: INC:A:24940 **WASHINGTONVILLE** NY 10992 Amount of Each Receipt this Period FEC ID number of contributing 20.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR FINANCE Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 95.00 SUBTOTAL of Receipts This Page (optional)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 220 (check only one) X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) KEVIN BURON Mailing Address 301 TEMPLETON CT City GRANITE BAY FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State CA C Occupation VP SALE Aggregate		Date of Receipt M M Z 4 Z 0 0 6 Transaction ID: INC:A:24844 Amount of Each Receipt this Period 25.00
3.	PEGEEN BUTTERFIELD Mailing Address 23 NUTTING PLACE City WEST CALDWELL FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	L	Zip Code 07006	Date of Receipt M M A Z 4 Z 0 0 6 Transaction ID: INC:A:24782 Amount of Each Receipt this Period 25.00
C .	Full Name (Last, First, Middle Initial) DOREEN CALDER Mailing Address 441 S ELM STREET City MAYWOOD FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	1	Zip Code 07607 n SINESS REQUIREMENTS e 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
s	UBTOTAL of Receipts This Page (optional)		·····	90.00
T	OTAL This Period (last page this line number or	nlv))	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 105 / 220 (check only one)
IT	EMIZED RECEIPTS		or each category of the	
II LIVIIZED ALCEIP 13			Detailed Summary Page	X 11a 11b 11c 12
			,	13 14 15 16 17
Ar	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me 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.
abla	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) RAYMOND CARLUCCI			Date of Receipt
	Mailing Address 24 SHERI DRIVE			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24932
	ALLENDALE	NJ	07401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		52.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n NL MGR GROUP	7
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1		1
	Other (specify) ▼	l	682.50	
				4
<u> </u>	Full Name (Last, First, Middle Initial) MARY CASALE			Date of Receipt
	Mailing Address 822 CEDAR AVE			M M / D D / Y Y Y Y
				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24847
	HADDENFIELD	NJ	08033	Amount of Each Receipt this Period
	EEC ID number of contribution			
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	า	
	MEDCO HEALTH SOLUTIONS	VP SALE	S	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		325.00	
				4
<u> </u>	Full Name (Last, First, Middle Initial) KAREN CATHCART RUSSELL			Date of Receipt
	Mailing Address 148 CLUBHOUSE DR			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:24727
	WEST COLUMBIA	SC	29172	Amount of Each Receipt this Period
			EOTTE	Amount of Each recorpt this i chea
	FEC ID number of contributing federal political committee.			25.00
Name of Employer MEDCO HEALTH SOLUTIONS		Occupation SR DIR (1 CLINICAL SVCS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1		1
	Other (specify) ▼		265.00	
				4
				102.50
S	UBTOTAL of Receipts This Page (optional)		······	102.30
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 106 / 220		
ITEMIZED RECEIPTS		or each category of the	(check only one)		
TI EIIIIEED TIEGEII 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17		
Any information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions		
or for commercial purposes, other than using the nar	me and add	dress of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
MEDCO HEALTH SOLUTIONS INC. POL	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)		
Full Name (Last, First, Middle Initial)					
A. JOSEPH CONOSHENTI			Date of Receipt		
Mailing Address 5 MAGNOLIA DRIVE			06 24 2006		
City	State	Zip Code	Transaction ID: INC:A:24733		
MARLBORO	NJ	07746	Amount of Each Receipt this Period		
FEC ID number of contributing			25.00		
federal political committee.	C		25.00		
MEDOO HE'ALTH SOLLITIONS	Occupation		7		
	SR DIR D				
Receipt For: Primary General	Aggregate	Year-to-Date ▼			
Other (specify) ▼		325.00			
Full Name (Last, First, Middle Initial) B. WILLIAM CONSIDINE			Date of Receipt		
Mailing Address 130 WEST 67TH STREE	T, #4J		M M / D D / Y Y Y Y		
			06 24 2006		
City	State	Zip Code	Transaction ID: INC:A:25036		
NEW YORK	NY	10023	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
MEDOO HE'NI TH SOLLITIONS	Occupation	า BUSINESS PLANNING & DE	V		
Receipt For:		Year-to-Date ∇	<u> </u>		
Primary General	7.99.094.0				
Other (specify) ▼		325.00			
Full Name (Leat First Middle 1993)					
Full Name (Last, First, Middle Initial) C. ROBERT COOK			Date of Receipt		
Mailing Address 270 S FRANKLIN TURNP	PIKE		M " M / D " D / Y " Y " Y " Y		
Cit.	Ctata	Zip Code	06 24 2006		
City RAMSEY	State NJ	21p Code 07446	Transaction ID: INC:A:24749 Amount of Each Receipt this Period		
FEC ID number of contributing		07110			
federal political committee.	C		25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	1		
		H CARE OPS-TECHNOLOG	<u> </u>		
Receipt For: Primary General	Aggregate	Year-to-Date ▼			
Primary General Other (specify) ▼	' '	325.00			
			75.00		
SUBTOTAL of Receipts This Page (optional)		>	73.00		
TOTAL This Period (last page this line number only)					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the nar	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	MEDCO HE'ALTH SOLLITIONS		Zip Code 07871 ORMACY NETWORK MGMT E Year-to-Date ▼ 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Full Name (Last, First, Middle Initial) ROSELIN DANIEL Mailing Address 17 DEVONSHIRE DRIVE City	Date of Receipt M M		
	RANDOLPH FEC ID number of contributing federal political committee.	NJ C	07869	Amount of Each Receipt this Period 25.00
	MEDOO HE'NI THEONE		BENEFIT DELIVERY SYS Year-to-Date 325.00	
C .	Full Name (Last, First, Middle Initial) KENNETH DANIELS Mailing Address 2903 CHUKKAR COURT	Date of Receipt 0 6 2 4 2 0 0 6		
	City PLANT CITY FEC ID number of contributing federal political committee.	State FL	Zip Code 33567	Transaction ID: INC:A:24891 Amount of Each Receipt this Period 25.00
	MEDOO HE'XI TH SOLLITIONS	Occupation VP/GM Aggregate	Year-to-Date ▼ 625.00	
s	UBTOTAL of Receipts This Page (optional)			100.00
T	OTAL This Period (last page this line number only	v)		

S	CHEDULE A (FEC Form 3X)		Llac concrete cobodule(a)	FOR LINE NUMBER: PAGE 108 / 220
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•	EIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and ado	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
\angle				,
Α.	Full Name (Last, First, Middle Initial)			Data of Descipt
Α.	MARY DASCHNER Mailing Address 2926 EWING AVE S			Date of Receipt
	Walling Address 2920 EWING AVE S			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24808
	MINNEAPOLIS	MN	55416	Amount of Each Receipt this Period
	FEC ID number of contributing			192.30
	federal political committee.	C		192.30
	Name of Employer	Occupation	 1	-
	Name of Employer MEDCO HEALTH SOLUTIONS		ENERAL MGR MEDICARE	
	Receipt For:		Year-to-Date ▼	7
	Primary General	1 1	2400.00	
	Other (specify) ▼		2499.90	
	E HALL OF THE LOCAL PROPERTY OF THE LOCAL PR			
В.	Full Name (Last, First, Middle Initial) DANIEL DAVISON			Date of Receipt
	Mailing Address 402 HIGHLAND AVE			M M / D D / Y Y Y Y
				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24933
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	rederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		VP PRIC		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	650.00	
	(cpss.,), \	-	0 0 0 0 0 0 0	'
_	Full Name (Last, First, Middle Initial)			
C.	LUCA DEFLORENTIIS			Date of Receipt
	Mailing Address W62 N1032 FAIRHAVE	N C I		06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24866
	CEDARBURG	WI	53012	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	า	7
	MEDCO HEALTH SOLUTIONS	DIR ACC		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		325.00	
	Other (specify) ▼	0 0	025.00	
٩	UBTOTAL of Receipts This Page (optional)			267.30
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SC	HEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 109 / 220
ITEMIZED RECEIPTS			or each category of the	(check only one)
	inized recent to		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Δην	information copied from such Reports and State	ements may	not be sold or used by any perso	
or fo	r commercial purposes, other than using the na	me and add	ress of any political committee to	solicit contributions from such committee.
<u> </u>	IAME OF COMMITTEE (In Full)			
۱ 🗸	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)
	ull Name (Last, First, Middle Initial) PAUL DENIS			Date of Receipt
N	Mailing Address 101 HALIFAX ROAD			06 24 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24950
<u>N</u>	<u>MAHWAH</u>	NJ	07430	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		100.00
N	lame of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CONT	RACT ADMINISTRATOR	
F	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1	1300.00	
	Other (specify) ▼			
	rull Name (Last, First, Middle Initial) KAREN DEZEARN			Date of Receipt
N	Mailing Address 3625 PATTERSTONE DI	R		M M / D D / Y Y Y Y
-				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24729
_	ALPHARETTA	GA	30022	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		25.00
_	·			
V	Iame of Employer //EDCO HEALTH SOLUTIONS	Occupation		
_	Receipt For:		ACCT EXEC Year-to-Date ▼	_
'	Primary General	Aggregate		
	Other (specify)	0 0	325.00	
	rull Name (Last, First, Middle Initial) ROBBIN DICESARE			Date of Receipt
N	Mailing Address 1003T HIGH STREET			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24928
<u> </u>	BURLINGTON TOWNSHI	NJ	08016	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		9.28
_	lame of Employer MEDCO HEALTH SOLUTIONS		TECHNOLOGY	
F	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	232.00	
	☐ Other (specify) ▼			
SUI	BTOTAL of Receipts This Page (optional)		.	134.28

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 110 / 220
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the nar	ements may me and ado	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) WILLIS DINGLE			Date of Receipt
	Mailing Address 17826 ARBOR GREENE	DR		0 6 2 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24781
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	MEDCO HE'ALTH SOLLITIONS	Occupation SR DIR H		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		625.00	
3.	Full Name (Last, First, Middle Initial) ROBERT DOLAN			Date of Receipt
	Mailing Address 9 CRANE AVENUE			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24915
	WEST CALDWELL	NJ	07006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	MEDOO HE'ALTH SOLLITIONS		EFIT DELIVERY SYSTEMS	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		325.00	
D .	Full Name (Last, First, Middle Initial) MERIDITH DORNER			Date of Receipt
	Mailing Address 4448 CREEK ROAD			06 24 2006
	City ALLENTOWN	State PA	Zip Code	Transaction ID: INC:A:24741
	FEC ID number of contributing		18104	Amount of Each Receipt this Period
	federal political committee.	C		25.00
MEDOCULE'ALTIL COLLITIONIC		Occupation NATL AC	n CCT EXEC	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00	
s	UBTOTAL of Receipts This Page (optional)			75.00
т.	OTAL This Pariod (last page this line number only	v)		

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 111 / 220
ΙT	EMIZED RECEIPTS	or each category of the	(check only one)
••		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and Statements r	nay not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the name and	address of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	LACTION COMMITTEE ()	Martin Harlin BAO
	MEDCO HEALTH SOLUTIONS INC. POLITICA	L ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
_	Full Name (Last, First, Middle Initial)		5. (5
Α.	H.RONALD DRIZIN Mailing Address 17 DAYBREAK		Date of Receipt
	Walling Address 17 DATBREAK		06 24 2006
	City State	Zip Code	Transaction ID: INC:A:24974
	IRVINE CA	92614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS Occupa VP CO	tion DNTRACT ADMINISTRATOR	_
	Receipt For: Aggreg	ate Year-to-Date ▼	
	Primary General	650.00	
	Other (specify) ▼	050.00	
В.	Full Name (Last, First, Middle Initial) MICHEL DUFRESNE		Date of Receipt
	Mailing Address 58 INDEPENDENCE WAY		0 6 2 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Transaction ID: INC:A:25030
	MORRIS TWP NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS Occupa VP INI	tion FO TECHNOLOGY	
		ate Year-to-Date ▼	
	Primary General	2499.90	
	Other (specify) 🔻		
_	Full Name (Last, First, Middle Initial) DANA DUNCAN		Date of Receipt
U.	Mailing Address 72 HALLEY DR		M M / D D / Y Y Y Y
			06 24 2006
	City State	Zip Code	Transaction ID: INC:A:24850
	POMONA NY	10970	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
		NGINEERING	
		ate Year-to-Date ▼	
	Primary General Other (specify) ▼	325.00	
	Carlot (opcony) 🔻	0 0 0 0 0 0 0 0 0	
s	UBTOTAL of Receipts This Page (optional)		267.30
		· .	
T	OTAL This Period (last page this line number only)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 112 / 220	
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16] 17
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any person	on for the purpose of soliciting contributions	
7	NAME OF COMMITTEE (In Full)		areas or any pointed committee to		
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
Α.	Full Name (Last, First, Middle Initial) YAACOV DUSHEK			Date of Receipt	
	Mailing Address 312 MEGAN CT			06 24 2006	
	City	State	Zip Code	Transaction ID: INC:A:24906	
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period	_
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR B	n BENEFIT DELIVERY SYS		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		325.00		
В.	Full Name (Last, First, Middle Initial) GEORGIA EDDLEMAN			Date of Receipt	
	Mailing Address 908 EDGEMEER LANE			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:24998	
	SOUTHLAKE	TX	76092	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		34.45	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	861.25		
<u> </u>	Full Name (Last, First, Middle Initial) MICHAEL EDWARDS			Date of Receipt	
	Mailing Address 109 KAREN PLACE			06 24 7 2006	
	City	State	Zip Code	Transaction ID: INC:A:24754	
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period	_
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		325.00		
	UBTOTAL of Receipts This Page (optional)			84.45	$\overline{}$
۲	COTOTAL OF TROCEIPES THIS Fage (optional)				Ħ.

S	CHEDULE A (FEC Form 3X)		Lles concrete cohodule(s)	FOR LINE NUMBER: PAGE 113 / 220
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•	EIVIIZED RECEIP I 3		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
\angle				,
	Full Name (Last, First, Middle Initial)			Data of Bassist
Α.	EDWARD EISENBERG Mailing Address 128 SUMMIT AVENUE			Date of Receipt
	120 SUIVIVIT AVENUE			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25043
	UPPER MONTCLAIR	NJ	07043	Amount of Each Receipt this Period
	FEC ID number of contributing			40.00
	federal political committee.	C		40.00
	Name of Employer	Occupation	 n	-
	Name of Employer MEDCO HEALTH SOLUTIONS		RE CHIEF MEDICAL OFFICI	ER
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		E0E 00	
	Other (specify) ▼		505.00	
	E III A A F			
В.	Full Name (Last, First, Middle Initial) FREDERICK ELSTON			Date of Receipt
	Mailing Address 106 GRAHAM TERRAC	E		M M / D D / Y Y Y Y
				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24907
	SADDLE BROOK	NJ	07663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	rederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			CAL SPECIALIST	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		325.00	
				'
_	Full Name (Last, First, Middle Initial)			5. (5
C.	BRAD EPSTEIN Mailing Address 359 ONG HILL BOAD	r A O T		Date of Receipt
	Mailing Address 359 LONG HILL ROAD	EASI		06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25047
	BRIARCLIFF MANOR	NY	10510	Amount of Each Receipt this Period
	FEC ID number of contributing	С		40.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	7
		VP CORI	P COMMUNICATIONS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		520.00	
	Other (specify) ▼		020.00	
Г				
s	JBTOTAL of Receipts This Page (optional)			105.00
\vdash	ago (optional)			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 114 / 220
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) A. ROBERT EPSTEIN			Date of Receipt
Mailing Address 75 TWEED BLVD			06 24 2006
City	State	Zip Code	Transaction ID: INC:A:24704
UPPER GRANDVIEW FEC ID number of contributing federal political committee.	C	10960	Amount of Each Receipt this Period 120.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CMO SV	n P MEDICAL&ANLYTC AFFR	_ s
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1560.00	
Full Name (Last, First, Middle Initial) YAKOV ESTERLIS			Date of Receipt
Mailing Address 25 STONEHEDGE DR City State			06 24 2006
		Zip Code	Transaction ID: INC:A:25000
WEST NYACK FEC ID number of contributing	NY	10994	Amount of Each Receipt this Period
federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BENEFIT DELIVERY SYS	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify) ▼		325.00	
Full Name (Last, First, Middle Initial) EDWARD FARGIS			Date of Receipt
Mailing Address 216 ELMWOOD AVEN	NUE		06 24 2006
City HO-HO-KUS	State NJ	Zip Code 07423	Transaction ID: INC:A:25023
FEC ID number of contributing		07423	Amount of Each Receipt this Period
federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	<u>EL</u>	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify) ▼		325.00	
SUBTOTAL of Receipts This Page (optional)		·····	170.00
TOTAL This Period (last page this line number	only)	>	
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) RICHARD FEIFER Mailing Address 32 EILEEN DR City MAHWAH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07430 n ICAL SVCS e 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
3.	Full Name (Last, First, Middle Initial) THOMAS FEITEL Mailing Address 58 APPLE HILL DR City GILLETTE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07933 n RP MKTG & E-COMM e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	Full Name (Last, First, Middle Initial) THOMAS FERRAZZANO Mailing Address 138 HEIGHTS ROAD 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 n CAL SPECIALIST e Year-to-Date ▼	Date of Receipt M M M / 24 / 2006 Transaction ID: INC:A:24934 Amount of Each Receipt this Period 25.00
S	UBTOTAL of Receipts This Page (optional)		·····	267.23
т	OTAL This Period (last page this line number o	nlv))	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) THOMAS FERRAZZANO Mailing Address 138 HEIGHTS ROAD 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 OAL SPECIALIST 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
3.	Full Name (Last, First, Middle Initial) THOMAS FERRAZZANO Mailing Address 138 HEIGHTS ROAD 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 OAL SPECIALIST e 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
D.	Full Name (Last, First, Middle Initial) EDWARD FISCHER Mailing Address 465 OLD STONE 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	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional))	75.00
T	OTAL This Period (last page this line number on	lv)		

SI	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 117 / 220
,		Use separate schedule(s) or each category of the		(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the i	atements may name and ado	not be sold or used by any personers of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ANTHONY FLOWERS			Date of Receipt
	Mailing Address 1933 MT. OLIVE AGOSTA ROAD			06 24 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24882
	NEW BLOOMINGTON	OH	43341	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		HLTH CARE OPS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	325.00	
	Other (specify)	0 0	0 0 0 0 0 0 0	1
В.	Full Name (Last, First, Middle Initial) KEVIN FRANCO			Date of Receipt
	Mailing Address 140 BELLAIR RD			M M / D D / Y Y Y Y
	UNIT Q	Ctata	7:- O-d-	06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24951
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Nome of Employer	Occupation	2	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General	1 1	260.00	7
	Other (specify)	0 0	260.00	1
<u> </u>	Full Name (Last, First, Middle Initial) JOSEPH FRENDO			Date of Receipt
	Mailing Address 9 GREEN HILL TRAIL			M M / D D / Y Y Y Y
	City	Ctata	7in Cada	06 24 2006
	City TROPHY CLUB	State TX	Zip Code 76262	Transaction ID: INC:A:24897
		1/	70202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1250.00	11
	Other (specify)			1
	LIPTOTAL of Possints This Posse (anticase)			95.00
\vdash	UBTOTAL of Receipts This Page (optional)			

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 118 / 220
•		Use separate schedule(s) or each category of the		(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ANDREW FRIEDELL			Date of Receipt
	Mailing Address 55 WHEELER			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24773
	EDGEWOOD	RI	02905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS		TE GOVERNMENT AFFAIR	s
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	390.00	
	Cure (epoon) \	0 0	1 1 1 1 1 1 1	1
<u> </u>	Full Name (Last, First, Middle Initial) JOSEPH GALARDI			Date of Receipt
	Mailing Address 24 MOREHOUSE PL			M M / D D / Y Y Y Y
	Cit.	01-1-	7:- Oada	06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24702
	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 MANAGI	n NG COUNSEL	
	Receipt For:	1	Year-to-Date ▼	
	Primary General	199.193		1
	Other (specify) ▼	0 0	650.00	
<u> </u>	Full Name (Last, First, Middle Initial) PAMELA GALASSINI			Date of Receipt
	Mailing Address 333 N. CANAL ST. #180	04		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:25009
	CHICAGO	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
	Receipt For:		Year-to-Date ▼	
	Primary General	35 0 11		1
	Other (specify) ▼		1300.00	
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				180.00
S	UBTOTAL of Receipts This Page (optional)	·····		100.00

S	CHEDULE A (FEC Form 3X)		Llan appareta aphadula(a)	FOR LINE NUMBER: PAGE 119 / 220
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
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or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and ado	not be sold or used by any persol dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
\angle				,
	Full Name (Last, First, Middle Initial)			Data of Bassist
Α.	BARNEY GALLASSIO Mailing Address 69 LAKEVIEW DR			Date of Receipt
	Walling Addices 69 LAKEVIEW DR			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24872
	OLD TAPPAN	NJ	07675	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		30.00
	Name of Employer	Occupation	า	-
	Name of Employer MEDCO HEALTH SOLUTIONS	•	NT RELATIONS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	201.00	
	Other (specify) ▼		381.92	
	5 HAL (4) 5 1 A 1 H 1			
В.	Full Name (Last, First, Middle Initial) MICHAEL GALVIN			Date of Receipt
	Mailing Address 4 LONE PINE LANE			M M / D D / Y Y Y Y
				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25032
	WESTPORT	CT	06880	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	rederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			EF INFRASTRUCTURE OFF	F-R
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	1625.00	
		1 1		
_	Full Name (Last, First, Middle Initial)			
C.	PETER GAYLORD			Date of Receipt
	Mailing Address 1201 BRIDGE STREET			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24701
	ASBURY PARK	NJ	07712	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	┪
	MEDCO HEALTH SOLUTIONS		NCIAL EVALUATIONS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	-	650.00	
	Other (specify) ▼		000.00	
٩	JBTOTAL of Receipts This Page (optional)			225.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 120 / 220
ITEMIZED RECEIPTS			or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	y information copied from such Reports and Sta	otomonte may	y not be sold or used by any perso	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
\angle	5 HAL			
Α.	Full Name (Last, First, Middle Initial) FRANK GENTILELLA			Date of Receipt
	Mailing Address 20 BROOKSHIRE DR			M M / D D / Y Y Y Y
				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24779
	ROBBINSVILLE	NJ	08691	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			L MGR GROUP	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify)		650.00	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 2 PELL FARM ROAD			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25005
	SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing	C		192.31
	federal political committee.	<u> </u>		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	
		GENERA		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2500.03	
	care (openly) \	-		,
_	Full Name (Last, First, Middle Initial)			
C.	MICHELE GLYNN Mailing Address 26 FURMAN CT			Date of Receipt
	Mailing Address 26 FURMAN CT			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24918
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing	C		25.00
	federal political committee.			
			PRODUCT MGMT	
Receipt For: Aggregate Primary General		e Year-to-Date ▼		
	Other (specify)		325.00	
				1
s	UBTOTAL of Receipts This Page (optional)			267.31
I T	OTAL This Period (last page this line number or	nlv)		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 121 / 220		
•		Use separate schedule(s) or each category of the		(check only one)		
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12		
			2 otaliou cullinary i ago	13 14 15 16 17		
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) JAMES GORMAN			Date of Receipt		
	Mailing Address 11 WASHBURN RD			06 24 2006		
	City	State	Zip Code	Transaction ID: INC:A:24750		
	CANTON	CT	06022	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS		CLIENT & MKT PROG STRA	т		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼	' '	325.00			
	Cure (epoon) \		1 1 1 1 1 1 1			
В.	Full Name (Last, First, Middle Initial) JAMES GRANT			Date of Receipt		
	Mailing Address 1928 BEVERLY LANE			M M / D D / Y Y Y Y		
	011	01-1-	7'- 0-4-	06 24 2006		
	City	State	Zip Code	Transaction ID: INC:A:24793		
	BUFFALO GROVE	IL	60089	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 FINA	n NCIAL INSIGHTS			
	Receipt For:	Aggregate	e Year-to-Date ▼	7		
	Primary General Other (specify) ▼	0 0	325.00			
_	Full Name (Last, First, Middle Initial)			Date of Descript		
U.	EDWARD GRIX Mailing Address 525 ORANGEBURG RI	`		Date of Receipt		
	Mailing Address 525 ORANGEBURG RI	J		06 24 2006		
	City	State	Zip Code	Transaction ID: INC:A:24815		
	PEARL RIVER	NY	10965	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n E-COM BUSINESS OPS			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General	1 1	315.00			
	Other (specify)		010.00			
1.				75.00		
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COUEDING A /FEC Form 2V)				FOR LINE NUMBER: PAGE 122 / 220
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS			or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar	y information copied from such Reports and Sta	atements may	v not be sold or used by any perso	
or	for commercial purposes, other than using the n	name and add	dress of any political committee to	solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) GINA GRUHN			Date of Receipt
	Mailing Address 13 WEATHER VANE DI	RIVE		06 24 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24840
	CONVENT STATION	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		325.00	1
	Other (specify)	0 0	325.00	
В.	Full Name (Last, First, Middle Initial) RICHARD GUIOR			Date of Receipt
	Mailing Address 50 BELLEVUE AVE			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24716
	SUMMIT	NJ	07901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		90.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACC1		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify)		1170.00	
C.	Full Name (Last, First, Middle Initial) MARK HALLORAN			Date of Receipt
	Mailing Address 19 KINGS RIDGE ROAL	D		06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24908
	LONG VALLEY	NJ	07853	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07000	80.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF IN	n NFO OFFICER	
			e Year-to-Date ▼	
				1
	Other (specify)	, .	1040.00	
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5	UBTOTAL of Receipts This Page (optional)			195.00
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 123 / 220
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		Detailed Summary Page	13 14 15 16 17
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NAME OF COMMITTEE (In Full)			
MEDGO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) GREGORY HANSEN			Date of Receipt
Mailing Address 1659 ISABELLA PARKW	VAY		06 24 7 2006
City	State	Zip Code	Transaction ID: INC:A:25008
CHASKA	MN	55318	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 ACCT	SVCS & ADMIN	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	650.00	
Full Name (Last, First, Middle Initial) KELLY HANZAWA			Date of Receipt
Mailing Address 1116 OAKCROFT LANE			06 24 2006
City	State	Zip Code	Transaction ID: INC:A:24977
SOMERSET	NJ	08873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n NT REQUIREMENTS	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		325.00	
Full Name (Last, First, Middle Initial) D. PETER HARTY			Date of Receipt
Mailing Address 19520 YELLOW WING (COURT		0 6 2 4 2 0 0 6
City	State	Zip Code	Transaction ID: INC:A:24703
COLORADO SPRINGS	CO	80908	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.31
		Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	2273.86	
SUBTOTAL of Receipts This Page (optional)			267.31
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S	SCHEDULE A (FEC Form 3X)		Llas concreto cobodulo(s)	FOR LINE NUMBER: PAGE 124 / 220
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or	y information copied from such Reports and State for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) BILL HEAD			Date of Receipt
	Mailing Address 501 SLATERS LANE #816			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25052
	ALEXANDRIA	VA	22314	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 PUB	n LIC AFFAIRS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1	220.00	
	Other (specify) ▼	0 0		
В.	Full Name (Last, First, Middle Initial) MARK HEGGESTAD			Date of Receipt
	Mailing Address 13210 N. 11TH AVE.			M M / D D / Y Y Y Y
	Cit.	01-1-	7'- Oada	06 24 2006
	City PHOENIX	State AZ	Zip Code	Transaction ID: INC:A:24759
		AZ	85029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
		10 "		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR SAL		
	Receipt For:		Year-to-Date ▼	+
	Primary General	7.99.094.0		1
	Other (specify) ▼	0 0	325.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) SCOTT HELMUS			Date of Receipt
	Mailing Address 23 VALLEY RD			06 24 YYYY 2006
	City	State	Zip Code	Transaction ID: INC:A:24743
	SUCCASUNNA	NJ	07876	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 PHAF	n RMACIES	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		550.00	
	Other (specify)		330.00	
١	UBTOTAL of Receipts This Page (optional)			100.00
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\setminus	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	ACTION COMMITTEE (a.k.	a. Medco Health PAC)	
Α.	Full Name (Last, First, Middle Initial) ERIC HESS			Date of Receipt	
	Mailing Address 10 CARLTON RD			06 24 2006	
	City	State	Zip Code	Transaction ID: INC:A:24805	
	FLANDERS	NJ	07836	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		40.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENGI	n NEERING & OPS		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		520.00	7	
	Other (specify)	0 0	020.00		
Ь	Full Name (Last, First, Middle Initial)			Data of Danaira	
В.	STEPHEN HOBSON Mailing Address 1 HERITAGE RD			Date of Receipt	
	Mailing Address HENTIAGE ND			06 24 2006	
	City	State	Zip Code	Transaction ID: INC:A:24880	
	FLORHAM PARK	NJ	07932	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	1		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		650.00		
<u> </u>	Full Name (Last, First, Middle Initial) GLENN HOFFMAN			Date of Receipt	
	Mailing Address 974 HILLCREST ROAD			0 6 2 4 2 0 0 6	
	City	State	Zip Code	Transaction ID: INC:A:24953	
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		30.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FACII			
	Primary General		e Year-to-Date ▼		
			390.00		
	Other (specify)		390.00		
s	UBTOTAL of Receipts This Page (optional)			120.00	
T	OTAL This Period (last page this line number or	nly)			

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 126 / 220
ITEMIZED RECEIPTS		or each category of the	(check only one)	
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Δr	ny information copied from such Reports and Sta	atamante mai	y not be sold or used by any perso	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
\angle				
Α.	Full Name (Last, First, Middle Initial) TIMOTHY HOGAN			Date of Receipt
Λ.	Mailing Address 9 HIRLE ST			M M / D D / Y Y Y Y
	Maining / Mainin			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24818
	CORNWALL ON HUDSON	NY	12520	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	<u> </u>	1
	MEDCO HEALTH SOLUTIONS	TECHNIC	CAL SPECIALIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		325.00	
	Other (specify)		020.00	
_	Full Name (Last, First, Middle Initial)			
В.	STEPHEN HOLODAK			Date of Receipt
	Mailing Address 49 S HILLSIDE AVE			M M / D D / Y Y Y Y
				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24904
	ELMSFORD	NY	10523	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		80.00
	rederal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
		_	RVENTION DELIVERY SYS	<u> </u>
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1040.00	
	Ctrici (Specify) 🖣	1 1	0 0 0 0 0 0 0	
_	Full Name (Last, First, Middle Initial)			
C.	WALTER HOSP			Date of Receipt
	Mailing Address 1 OLD LANE			0 6 2 4 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24861
	SCARSDALE	NY	10583	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Family or			_
Name of Employer Occupation MEDCO HEALTH SOLUTIONS VP TREA				
	Receipt For:	-1	Year-to-Date ▼	1
	Primary General	199.19	1 1 1 1 1 1 1 1	
	Other (specify) ▼		300.00	
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				130.00
S	UBTOTAL of Receipts This Page (optional)		······	130.00
T	OTAL This Period (last page this line number o	nly)	>	

ITEMIZED RECEIPTS or each category of the Detailed Summary Page X 11a 11b 11c 12	SC	CHEDULE A (FEC Form 3X)		Lie a consulta a chardula (a)	FOR LINE NUMBER:	PAGE 127 / 220			
Detailed Summary Page 11a		·		Use separate schedule(s) or each category of the	(check only one)				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) JAINE HULS: Mailing Address 95 GORDON RD City State Zip Code Transaction ID: INC:A:24939 Amount of Each Receipt this Period FEC ID number of contributing federal political committee C C Coupation VP FINANCE Receipt For: Primary General Other (specify) ▼ State Zip Code NY 10025 Transaction ID: INC:A:24309 Amount of Each Receipt this Period FEC ID number of contributing federal political committee C Date of Receipt NY 10025 Transaction ID: INC:A:24306 Amount of Each Receipt this Period FEC ID number of contributing federal political committee C C C C C C C C C C C C C C C C C C		EIVIIZED RECEIP 13							
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) JANE HILLSE Name (Last, First, Middle Initial) City State Zip Code SESEX FELLS NJ 07021 FEC ID number of contributing federal political committee. Cap State S	_								
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) JANE HULES Mailing Address 95 GORDON RD City Primary General Other (specify) ▼ FEC ID number of contributing feoderal political committee. City State Zip Code Primary General Other (specify) ▼ FEC ID number of contributing feoderal political committee. City State Zip Code Primary General Other (specify) ▼ FEC ID number of contributing feoderal political committee. City State Zip Code NY 10025 FEC ID number of contributing feoderal political committee. City State Zip Code NY 10025 FEC ID number of contributing feoderal political committee. City State Zip Code NY 10025 FEC ID number of contributing feoderal political committee. City State Zip Code NY 10025 FEC ID number of contributing feoderal political committee. City State Zip Code Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt NY 10025 FEC ID number of contributing feoderal political committee. City State Zip Code Aggregate Year-to-Date ▼ Primary General City State Zip Code Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Date of Receipt ins Period FEC ID number of contributing feoderal political committee. City State Zip Code GAINESVILLE FL 32608 FEC ID number of contributing feoderal political committee. City State Zip Code GAINESVILLE FL 32608 FEC ID number of contributing feoderal political committee. City Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ GENERAL THIS SOLUTIONS EXEC DIR CLINICAL SVCS Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ GENERAL THIS SOLUTIONS Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Annount of Each Receipt this Period First Name of English State Transaction ID: INC:A-2-4706 An	An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of solicit solicit contributions from s	ing contributions such committee.			
MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Lest, First, Middle Initial) JANNE HULSE Mailing Address 95 GORDON RD City State SESK FELLS NJ 97021 FEC ID number of contributing federal political committee. City Name (Last, First, Middle Initial) Date of Receipt (So.00) Full Name (Last, First, Middle Initial) Date of Receipt (So.00) Full Name (Last, First, Middle Initial) Date of Receipt (So.00) FULL Name (Last, First, Middle Initial) Date of Receipt (So.00) FULL Name (Last, First, Middle Initial) Date of Receipt (So.00) FULL Name (Last, First, Middle Initial) Date of Receipt (So.00) FULL Name (Last, First, Middle Initial) Date of Receipt (So.00) FULL Name (Last, First, Middle Initial) Date of Receipt (So.00) FULL Name (Last, First, Middle Initial) Date of Receipt (So.00) FULL Name (Last, First, Middle Initial) Date of Receipt (So.00) FULL Name (Last, First, Middle Initial) Date of Receipt (So.00) FULL Name (Last, First, Middle Initial) Date of Receipt (So.00) Date of	$\overline{}$			71					
A. JAME HULSE Mailing Address 95 GORDON RD City ESSEX FELLS NJ O'021 FEC ID number of contributing federal political committee. Name of Employer (Sepecify) ** Full Name (Last, First, Middle Initial) Date of Receipt To: Primary General G	\rangle		LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)				
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tederal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ General Other (s		ESSEX FELLS	NJ	07021	Amount of Each Red	ceipt this Period			
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Primary General Other (specify) ▼ 650.00 Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 730 COLUMBUS AVENUE City State Zip Code NY 10025 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Full Name (Last, First, Middle Initial) Sussan ITO Mailing Address 6366 SW 90TH STREET City State Zip Code Sussan ITO Mailing Address 6366 SW 90TH STREET City State Zip Code Galness 70 State S		Name of Employer MEDCO HEALTH SOLUTIONS							
Tull Name (Last, First, Middle Initial) DavID ISRAEL Mailing Address 730 COLUMBUS AVENUE City State Zip Code NY 10025 FEC ID number of contributing federal political committee. Name of Employer MEDOO HEALTH SOLUTIONS Fecipt For: Primary General Other (specify) ▼ Tansaction ID: INC:A:24706 Amount of Each Receipt Inis Period Aggregate Year-to-Date ▼ Transaction ID: INC:A:24706 Amount of Each Receipt Inis Period Transaction ID: INC:A:24706 Amount of Each Receipt Inis Period Transaction ID: INC:A:24706 Amount of Each Receipt Inis Period Transaction ID: INC:A:24706 Date of Receipt Transaction ID: INC:A:24706 Amount of Each Receipt Inis Period Transaction ID: INC:A:24712 Amount of Each Receipt Inis Period Transaction ID: INC:A:24712 Amount of Each Receipt Inis Period Transaction ID: INC:A:24712 Amount of Each Receipt Inis Period Transaction ID: INC:A:24712 Amount of Each Receipt Inis Period Transaction ID: INC:A:24712 Amount of Each Receipt Inis Period Transaction ID: INC:A:24712 Amount of Each Receipt Inis Period Transaction ID: INC:A:24712 Transaction ID: INC:A:24712 Amount of Each Receipt Inis Period Transaction ID: INC:A:24712 Transaction ID: INC:A:24712 Amount of Each Receipt Inis Period Transaction ID: INC:A:24712 Transaction ID: IN		Receipt For:	Aggregate	e Year-to-Date ▼					
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NEW YORK FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ State Zip Code FL 32608 FEC ID number of contributing federal political committee. City State Zip Code FL 32608 FEC ID number of contributing federal political committee. City State Zip Code FL 32608 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Amount of Each Receipt this Period Amount of Each Receipt this Period FEC Do number of contributing federal political committee. Aggregate Year-to-Date ▼ 125.00					06 24	2006			
FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation SR DIR BUSINESS DEVELOPMENT Aggregate Year-to-Date ▼		•		•					
Name of Employer MEDCO HEALTH SOLUTIONS Cocupation SR DIR BUSINESS DEVELOPMENT Receipt For:			NY	10025	Amount of Each Red	ceipt this Period			
Receipt For:			C			25.00			
Primary General Other (specify) ▼ Date of Receipt Mailing Address 6366 SW 90TH STREET City State Zip Code GAINESVILLE FL 32608 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) 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							
Other (specify) ▼ Susan ITO Mailing Address 6366 SW 90TH STREET City State Zip Code GAINESVILLE FL 32608 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ Substate Zip Code Transaction ID: INC:A:24712 Amount of Each Receipt this Period EXEC DIR CLINICAL SVCS Receipt For: Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date ▼ Other (specify) ▼ Substate Zip Code Transaction ID: INC:A:24712 Amount of Each Receipt this Period 50.00			Aggregate	e Year-to-Date ▼					
Date of Receipt Mailing Address 6366 SW 90TH STREET City GAINESVILLE FL 32608 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary Other (specify) ▼ Page (optional) Date of Receipt Transaction ID: INC:A:24712 Amount of Each Receipt this Period 50.00 125.00				325.00					
Mailing Address 6366 SW 90TH STREET City State Zip Code GAINESVILLE FL 32608 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	_								
City GAINESVILLE FL 32608 FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ CU SUBTOTAL of Receipts This Page (optional)	j.				-				
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FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) PEC ID number of contributing 50.00 Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date ▼ 125.00				•					
federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Coccupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date ▼ 650.00		•	FL	32008	Amount of Each Red	ceipt this Period			
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 128 / 220
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			Detailed Summary Page	13
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$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) TODD JEFFREY			Date of Receipt
	Mailing Address 15 ELIZABETH STREET			06 24 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24996
	DUMONT	NJ	07628	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 PHAF	n RM CONTRACT & CONSULT	TING
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	1 1	325.00	
3.	Full Name (Last, First, Middle Initial) ANNE JOHNSTON			Date of Receipt
	Mailing Address 256 MADISON AVE			06 24 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24994
	RIVER EDGE	NJ	07661	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		390.00	
— C.	Full Name (Last, First, Middle Initial) RICHARD JONES			Date of Receipt
	Mailing Address 12 WADE HAMPTON TF	RAIL		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:24955
	HENDERSON	NV	89052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.08
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		377.00	
s	UBTOTAL of Receipts This Page (optional)		······	70.08
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T	OTAL This Period (last page this line number on	ly)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16	17			
Ar or	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.				
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) KATHRYN JONSRUD Mailing Address 16357 VICTORIA CURVE City PRIOR LAKE FEC ID number of contributing federal political committee.	SE State MN	Zip Code 55372	Date of Receipt 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		n ENT & MKT PROG STRAT Year-to-Date ▼ 325.00		_			
3.	Full Name (Last, First, Middle Initial) BECKY KAUS Mailing Address N81 W18359 TOURS DR			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City MENOMONEE FALLS FEC ID number of contributing federal political committee.	State WI	Zip Code 53051	Transaction ID: INC:A:24826 Amount of Each Receipt this Period 25.00	_ 7			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation OIR CLIN	n NICAL SVCS Year-to-Date ▼		_			
D .	Full Name (Last, First, Middle Initial) WILLIAM KEELER Mailing Address 63 MOUNTAIN GLEN RO.	AD		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City RINGWOOD	State NJ	Zip Code 07456	Transaction ID: INC:A:25015				
	FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period 25.00				
	MEDOO HEXITH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00					
s	SUBTOTAL of Receipts This Page (optional)							
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COUEDING A /FEC Form 2V)				FOR LINE NUMBER: PAGE 130 / 220
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
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۸۳	y information copied from such Reports and Sta	tomonto mo	, not be cold or used by any perce	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) WILLIAM KELLEY			Date of Receipt
	Mailing Address 1970 WOODLANDS PL			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24874
	POWELL	OH	43065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		625.00	1
	Other (specify) ▼	0 0	625.00	
_				
В.	Full Name (Last, First, Middle Initial) KEVIN KELLY			Date of Receipt
	Mailing Address 251 POPLAR AVE			0 6 2 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24730
	HACKENSACK	NJ	07601	Amount of Each Receipt this Period
			0.00	
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	CLIENT SVC DELIVERY	7
	Receipt For:		Year-to-Date ▼	
	Primary General	33 -3		1
	Other (specify) ▼		325.00	
				1
C.	Full Name (Last, First, Middle Initial) LISA KETNER			Date of Receipt
	Mailing Address 7 POINT VIEW			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24862
	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 MKTI	n NG & PRODUCT DEV	
			Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		650.00	
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	UBTOTAL of Receipts This Page (optional)			100.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 13	31 / 220
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					1617
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and ado	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contribut solicit contributions from such commit	tions tee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)	
\angle			`		
	Full Name (Last, First, Middle Initial)			Data of Bassint	
A.	KARIN KLEINEGGER Mailing Address 121 CONKLING TOWN	DOAD		Date of Receipt	V
	Mailing Address 121 CONKLING TOWN	HOAD			0 6
	City	State	Zip Code	Transaction ID: INC:A:24986	
	CHESTER	NY	10918	Amount of Each Receipt this Per	
	FEC ID number of contributing				-
	federal political committee.	C			50.00
	Name of Employer	Occupation	<u> </u>	\dashv	
	Name of Employer MEDCO HEALTH SOLUTIONS		T MGMT OPS		
	Receipt For:	1	Year-to-Date ▼	1	
	Primary General	1 1			
	Other (specify) ▼		650.00		
R	Full Name (Last, First, Middle Initial) KENNETH KLEPPER			Date of Receipt	
υ.	Mailing Address 295 GLEN PLACE			₹	YY
	250 GEEN 1 E/OE				0 6
	City	State	Zip Code	Transaction ID: INC:A:25021	
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Per	riod
	FEC ID number of contributing	C		19	92.30
	federal political committee.				,2.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7	
	MEDCO HEALTH SOLUTIONS	PRES &	CHIEF OPERATING OFFICE	ER	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		2499.90		
	Other (specify)		2-755.50		
_	Full Name (Last, First, Middle Initial)			_	
C.	JON KLINE			Date of Receipt	
	Mailing Address 36 CORTLAND TL				YY
			7. 0 .		0 0 6
	City	State	Zip Code	Transaction ID: INC:A:25017	
	MAHWAH	NJ	07430	Amount of Each Receipt this Per	riod
	FEC ID number of contributing federal political committee.	C		5	50.54
	Tederal political committee.				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
			PLANNING	_	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify)		657.02		
	□ Strict (Specify) ♥		0 0 0 0 0 0 0		
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	UBTOTAL of Receipts This Page (optional)			29	2.84
\vdash	22.2.7.2 or recorpto tino rago (opnona)				

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 132 / 220
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ements may me and ado	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. POL	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) BRADFORD KOGEN			Date of Receipt
Mailing Address 555 FORBUSH STREET			06 24 7 2006
City	State	Zip Code	Transaction ID: INC:A:24979
BOONTON	NJ	07005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
MEDOO HE'ALTH COLLITIONS	Occupation SR DIR C	CLIENT RETAIL	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		260.00	
Full Name (Last, First, Middle Initial) 3. KATHLEEN KORDUCKI			Date of Receipt
Mailing Address 920 CLARK STREET			06 / 24 / 2006
City	State	Zip Code	Transaction ID: INC:A:24748
BOWLING GREEN	ОН	43402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
MEDCO HEALTH SOLLITIONS	Occupation SR NATL	n . ACCT EXEC	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		265.00	
Full Name (Last, First, Middle Initial) C. RODGER KORMYLO			Date of Receipt
Mailing Address 1310 43RD AVE			06 24 7 2006
City	State	Zip Code	Transaction ID: INC:A:24833
KENOSHA	WI	53144	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Receipt For: Aggregat		n CCT EXEC	
		Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	325.00	
SUBTOTAL of Receipts This Page (optional)			70.00
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S	CHEDULE A (FEC Form 3X)		Llan appareta aphadula(a)	FOR LINE NUMBER: PAGE 133 / 220
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
•	EINIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
	information and discount December and Ot			13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements may lame and add	not be sold or used by any persol dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JOANN KRENITSKY			Date of Receipt
	Mailing Address 143 DEERFIELD TERR	ACE		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: INC:A:24770
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	1 BUS PLANNING & ADMIN	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		285.00	
	Cuter (Speedily)	0 0	0 0 0 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) BARBARA KRZAK			Date of Receipt
	Mailing Address 495 ISLAND WAY			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24911
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-CO	n M STRATEGY & DELIVERY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		550.00	
	Other (specify)	0 0		
<u> </u>	Full Name (Last, First, Middle Initial) MICHAEL KRZAN			Date of Receipt
	Mailing Address 2735 YORK RD			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24965
	COLUMBUS	OH	43221	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		AL VP PHARMACIES	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)	7	650.00	
			0 0 0 0 0 0 0	
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s	UBTOTAL of Receipts This Page (optional)			130.00
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0	CHEDIII E A /EEC Form 2V)			FOR LINE NUMBER: PAGE 134 / 220
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
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or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) CYNTHIA LAUBACHER			Date of Receipt
	Mailing Address 7017 COBALT WAY			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24864
	CITRUS HEIGHTS	CA	95621	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n GOVERNMENT AFFAIRS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1300.00	
	Other (specify)		1000.00	
<u> </u>	Full Name (Last, First, Middle Initial)			Patrick Provide
В.	ROBERT LONG	-		Date of Receipt
	Mailing Address 18 HARLIND TERRACE	06 24 2006		
	City	State	Zip Code	Transaction ID: INC:A:24855
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	CT EXEC	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		005.00	
	Other (specify)		325.00	
_	Full Name (Last, First, Middle Initial)			
C.	DEBRA LUDGATE			Date of Receipt
	Mailing Address 238 WOODLAND AVE			$\begin{bmatrix} & M & M & / & D & D & / & Y & Y & Y & Y & Y & Y & Y & Y & Y$
	City	State	Zip Code	Transaction ID: INC:A:24820
	SUMMIT	NJ	07901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n CREATIVE SVCS	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General		205.00	1
	Other (specify) ▼		325.00	
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 135 / 220		
	EMIZED RECEIPTS	or each category of the Detailed Summary Page	(check only one) X 11a 11b	11c 12		
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Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of solicit solicit contributions from s	ing contributions such committee.	
	NAME OF COMMITTEE (In Full)					
	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) CHERYL MACDONALD			Date of Receipt		
	Mailing Address 15011 EAGLEPARK PL			06 24	2006	
	City <u>LITHIA</u>	State FL	Zip Code 33547	Transaction ID: IN Amount of Each Re		
	FEC ID number of contributing federal political committee.	C			25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (n CS REQUIREMENTS			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00			
В.	Full Name (Last, First, Middle Initial) KENNETH MALLEY			Date of Receipt		
	Mailing Address 764 W. SADDLE RIVER ROAD			06 / 24	2006	
	City State		Zip Code	Transaction ID: INC:A:24807		
	HO HO KUS	NJ	07423	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing federal political committee.	C			50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROI	n DUCT & CHANNEL MKTING	i		
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼	0 0	650.00			
<u> </u>	Full Name (Last, First, Middle Initial) MICHAEL MANDAGLIO			Date of Receipt		
	Mailing Address 33 HICKORY TAVERN	RD		M M / D D D D D D D D D D D D D D D D D	2006	
	City	State	Zip Code	Transaction ID: IN	C:A:24714	
	GILLETTE	NJ	07933	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing federal political committee.	С			50.00	
Name of Employer MEDCO HEALTH SOLUTIONS VP FINA						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1		
_	Other (specify)	0 0	650.00			
s	UBTOTAL of Receipts This Page (optional)				125.00	
TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUM	
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$\overline{}$	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health	PAC)
۹.	Full Name (Last, First, Middle Initial) TAMARA MARSHALL			Date of Rece	eipt
	Mailing Address W144 N7150 TERRACE	DRIVE		06	24 2006
	City	State	Zip Code	Transaction	ID: INC:A:24822
	MENOMONEE FALLS	WI	53051	Amount of E	ach Receipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	. ACCT EXEC		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		325.00		
3.	Full Name (Last, First, Middle Initial) TODD MARTIN			Date of Rece	eipt
	Mailing Address 11825 SHEPPARDS CRO	OSSING		06	D D / Y Y Y Y Y Y 2 0 0 6
	City	State	Zip Code	Transaction	ID: INC:A:24789
	CLARKSVILLE	MD	21029	Amount of E	ach Receipt this Period
	FEC ID number of contributing federal political committee.	C			192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		1	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	2499.90		
— Э.	Full Name (Last, First, Middle Initial) ROBERT MATCHETT			Date of Rece	eipt
	Mailing Address 27 LAKEVILLE RD			06	24 2006
	City	State	Zip Code	Transaction	ID: INC:A:24757
	SUSSEX	NJ	07461	Amount of E	ach Receipt this Period
FEC ID number of contributing federal political committee.		C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		325.00		
s	UBTOTAL of Receipts This Page (optional)				242.30
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 137 / 220
	•		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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Ar or	ny information copied from such Reports and State for commercial purposes, other than using the i	atements may 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.
\setminus	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JEFFREY MAY			Date of Receipt
	Mailing Address 137 WASHINGTON AV	Έ		06 24 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24956
	HILLSDALE	NJ	07642	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	1	G DISTRIB & CONTROL	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	2499.90	
	Cirici (Specify)	-	0 0 0 0 0 0 0	4
— В.	Full Name (Last, First, Middle Initial) PATRICIA MAZZONE			Date of Receipt
	Mailing Address 56 PENOBSCOT ST			M M / D D / Y Y Y Y
	011	01-1-	7'- 01-	06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24860
	CLIFTON	NJ	07013	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	PRODUCT SVCS	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00	
_	Full Name (Last, First, Middle Initial) DANIEL MCCRONE			Date of Receipt
٥.	Mailing Address 41 HENRY COURT			M M / D D / Y Y Y Y
	The maining state of the state			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25045
	MOUNT ARLINGTON	NJ	07856	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)		250.00	1
_				
				267.30
L _s	UBTOTAL of Receipts This Page (optional)			
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: (check only one)	PAGE 138 / 220
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An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of solicit solicit contributions from s	ing contributions such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) THOMAS MCDONALD Mailing Address 0-45 27TH ST			Date of Receipt	/ Y Y Y Y Y
	City	State	Zip Code	0 6 2 4 Transaction ID: IN	2 0 0 6 C·A·24905
	FAIR LAWN	NJ	07410	Amount of Each Red	
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00		
3.	Full Name (Last, First, Middle Initial) COLLEEN MCINTOSH			Date of Receipt	
	Mailing Address 87 ROSELAWN RD	06 / 24	2006		
	City	State	Zip Code	Transaction ID: IN	
	HIGHLAND MILLS FEC ID number of contributing federal political committee.	C	10930	Amount of Each Rec	116.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1508.00		
	Full Name (Last, First, Middle Initial) STEVEN MCNAMARA			Date of Receipt	
	Mailing Address 112 GREEN TERRACE	WAY		06 24	2006
	City WEST MILFORD	State NJ	Zip Code 07480	Transaction ID: ING Amount of Each Rec	
	FEC ID number of contributing federal political committee.	C			192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP BUS	n SINESS OPS		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2500.03		
S	333.31				
T	OTAL This Period (last page this line number or	nly)			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 139 / 220
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or	ny information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from	such committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)	
			(-,	
	Full Name (Last, First, Middle Initial)				
Α.	DAVID MILLER			Date of Receipt	
	Mailing Address 7 CLOVER LANE		06 24	2006	
	City	Zip Code	Transaction ID: IN		
	RANDOLPH	State NJ	07869	Amount of Each Re	
	FEC ID number of contributing		0.000	7 Amount of Edon No	· · · · ·
	federal political committee.	C			25.00
	·				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
	Receipt For:		DR RELATIONS e Year-to-Date ▼		
	Primary General	Aggregate	r rear-to-date V	,	
	Other (specify)		325.00		
	Full Name (Last, First, Middle Initial)				
В.	KAREN MILLER			Date of Receipt	
	Mailing Address 14 ANDERSON RD		0 6 2 4	2006	
	City	State	Zip Code		
	WHARTON	NJ	07885	Transaction ID: IN	
		INU	07000	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation			
		SR DIR F			
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)		390.00		
	and (epseny) V		0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)				
C.				Date of Receipt	
	Mailing Address 12 LINCOLN ROAD			0 6 2 4	2006
	City	State	Zip Code	Transaction ID: IN	
	KINNELON	NJ	07405	Amount of Each Re	
	FEC ID number of contributing		000	7 Amount of Edon No	· · · · · ·
	federal political committee.	C			25.00
-				_	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n E-COM STRAT & DELI		
Receipt For: Primary Other (specify)				_	
			FIEAI-IO-DAIC V	1	
			325.00		
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s	UBTOTAL of Receipts This Page (optional)				80.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 140 / 220			
	EMIZED RECEIPTS		or each category of the	(check only one)			
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Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	n for the purpose of soliciting contributions solicit contributions from such committee.					
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)			
_	Full Name (Lost First Middle Leitiel)		·	T			
۹.	Full Name (Last, First, Middle Initial) BHUPESH MISTRY			Date of Receipt			
	Mailing Address 106 HAMBURG ROAD			06 24 2006			
	City	State	Zip Code	Transaction ID: INC:A:24722			
	PARSIPPANY FEC ID number of contributing federal political committee.	C	07054	Amount of Each Receipt this Period 25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CAL SPECIALIST				
	Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00				
3.	Full Name (Last, First, Middle Initial) PETER MONKHOUSE			Date of Receipt			
	Mailing Address 1320 BRONCO CIR	06 24 2006					
	City	State	Zip Code	Transaction ID: INC:A:24804			
	WARRINGTON FEC ID number of contributing	PA	18976	Amount of Each Receipt this Period			
	federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BEN	n EFIT DELIVERY SYSTEMS				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				
	Other (specify)		225.00				
).	Full Name (Last, First, Middle Initial) THOMAS MORIARTY			Date of Receipt			
	Mailing Address 86 WELLINGTON AVEN	UE		06 24 2006			
	City	State	Zip Code	Transaction ID: INC:A:24707			
	SHORT HILLS	NJ	07078	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS		PUTY GENERAL COUNSEL				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		650.00				
SUBTOTAL of Receipts This Page (optional)							
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) RICHARD MOUNTJOY Mailing Address 2 STONEBRIDGE RD City SPARTA FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07871 n _ ACCT EXEC e Year-to-Date ▼	Date of Receipt M M M / D D M 2 4 2 0 0 6 Transaction ID: INC:A:24987 Amount of Each Receipt this Period 20.00
3.	Full Name (Last, First, Middle Initial) KEVIN MURPHY Mailing Address 105 COVENTRY LN City TRUMBULL FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State CT C Occupation GENERA Aggregate		Date of Receipt M M M / 24 / 2006 Transaction ID: INC:A:24746 Amount of Each Receipt this Period 75.00
C .	Full Name (Last, First, Middle Initial) BECKY NAGLE Mailing Address 64 WALTER AVE City HASBROUCK HEIGHTS FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07604 n CLINICAL SVCS e Year-to-Date ▼	Date of Receipt M M A 24 2006 Transaction ID: INC:A:24747 Amount of Each Receipt this Period 25.00
s	UBTOTAL of Receipts This Page (optional)		······	120.00
T	OTAL This Period (last page this line number or	ılv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only)

PAGE 142 / 220 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) ARTHUR NARDIN Date of Receipt Mailing Address 28 POWDERHORN DR 06 24 2006 City Zip Code State Transaction ID: INC:A:24958 **KINNELON** 07405 NJ Amount of Each Receipt this Period FEC ID number of contributing 192.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation SVP PHARMACEUTICAL CONTRACTING Aggregate Year-to-Date ▼ Receipt For: Primary General 2496.00 Other (specify) Full Name (Last, First, Middle Initial) B. HAIK NOVSHADIAN Date of Receipt Mailing Address 45 DAVIS ROAD 0 6 24 2006 City Zip Code State Transaction ID: INC:A:24825 <u>SPARTA</u> NJ 07871 Amount of Each Receipt this Period FEC ID number of contributing C 26.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR E-COM STRAT & DELIV Receipt For: Aggregate Year-to-Date ▼ Primary General 338.00 Other (specify) Full Name (Last, First, Middle Initial) C. CHARLES OESTREICHER Date of Receipt Mailing Address 6 PARK DR SOUTH 06 24 2006 City State Zip Code Transaction ID: INC:A:24978 **RYE** NY Amount of Each Receipt this Period FEC ID number of contributing 50.00 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP E-COM STRATEGY & DELIVERY Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 268.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 220 (check only one) X 11a
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the i	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
\setminus	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) MELVIN OHL Mailing Address 274 E FRANKLIN TPKE	<u> </u>		Date of Receipt
	City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC:A:24929 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	1	CUREMENT & INVENTORY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
В.	Full Name (Last, First, Middle Initial) CLAUDINE OLSEN			Date of Receipt
	Mailing Address 4 HIGHGATE CT			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24971
	SUFFERN FEC ID number of contributing federal political committee.	C	10901	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
<u> </u>	Full Name (Last, First, Middle Initial) ALEXANDER ONIK			Date of Receipt
	Mailing Address 1 SCHINDLER CT			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25051
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		225.00	
s	UBTOTAL of Receipts This Page (optional)			100.00

S	CHEDULE A (FEC Form 3X)		Llas concrete cobodulo(s)	FOR LINE NUMBER: PAGE 144 / 220
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An	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<u></u>	NAME OF COMMITTEE (In Full)		are or any point and committee to	
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a k a	Medco Health PAC)
			(aa	
_	Full Name (Last, First, Middle Initial)			
A.				Date of Receipt
	Mailing Address 1 SCHINDLER CT			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24842
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		25.00
	Name of Employer	Occupation	2	_
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST	
	Receipt For:		e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		325.00	
R	Full Name (Last, First, Middle Initial) LUDIVINA PACAMARRA			Date of Receipt
٠.	Mailing Address 4 TEAK COURT			M M / D D / Y Y Y Y
				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24917
	RINGWOOD	NJ	07456	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
			R TECHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		650.00	
	Carlot (Specify)	0 0	1 1 1 1 1 1 1	
	Full Name (Last, First, Middle Initial)			
C.	DAWN PAGANO			Date of Receipt
	Mailing Address 185 PASCACK ROAD			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24916
	PARK RIDGE	NJ	07656	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		50.00
	Name of Employer	Occupation	<u> </u>	_
	Name of Employer MEDCO HEALTH SOLUTIONS	1 '	TECHNOLOGY	
	Receipt For:		e Year-to-Date ▼	
	Primary General		F00.00	1
	Other (specify)		500.00	
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				125.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 145 / 220
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or fo	information copied from such Reports and Stat r commercial purposes, other than using the na	ements may ıme and add	ress of any political committee to	of the purpose of soliciting contributions solicit contributions from such committee.
	IAME OF COMMITTEE (In Full)		·	
`	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)
_	ull Name (Last, First, Middle Initial) MICHELE PAIGE			Date of Receipt
M	Mailing Address 12 MILLBROOK COURT			06 24 7 2006
C	Sity	State	Zip Code	Transaction ID: INC:A:24838
L	IVINGSTON	NJ	07039	Amount of Each Receipt this Period
F fe	EC ID number of contributing ederal political committee.	C		25.00
N	lame of Employer IEDCO HEALTH SOLUTIONS	Occupation SR DIR N	MARKET STRATEGY	
F	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		325.00	
	Other (specify) ▼	0 0	023.00	
	ull Name (Last, First, Middle Initial)			Date of Receipt
_	Mailing Address 18 MOUNTAIN VIEW CT	-		M M / D D / Y Y Y Y
_				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24900
<u>F</u>	RIVERDALE	NJ	07457	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		25.00
_	ederai pointicai committee.			
N	lame of Employer MEDCO HEALTH SOLUTIONS	Occupation		
_			DUCT DEVELOPMENT	
۲	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		325.00	
	ull Name (Last, First, Middle Initial) HOMAS PETTYES			Date of Receipt
N	failing Address 8522 UPLAND LN NORT	H		06 24 2006
C	City	State	Zip Code	Transaction ID: INC:A:24783
<u>N</u>	MAPLE GROVE	MN	55311	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		30.00
N N	lame of Employer //EDCO HEALTH SOLUTIONS	Occupation GENERA	L MGR GROUP	
F	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		390.00	
	Other (specify) ▼		300.00	
	L			
SUI	BTOTAL of Receipts This Page (optional))	80.00
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SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 146 / 220
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Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and ado	not be sold or used by any persol dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JUDITH PLATKIN			Date of Receipt
	Mailing Address 29 BLACKWELL AVE			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24715
	MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		650.00	1
	Other (specify) ▼	0 0		
В.	Full Name (Last, First, Middle Initial) JANET PORAT			Date of Receipt
	Mailing Address 5 CRABAPPLE CT	06 24 2006		
	City	State	Zip Code	Transaction ID: INC:A:24786
	MONSEY	NY	10952	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n INESS REQUIREMENTS	
	Receipt For:		Year-to-Date V	\dashv
	Primary General	199.19		7
	Other (specify) ▼		325.00	
<u> </u>	Full Name (Last, First, Middle Initial) KARIN PRINCIVALLE			Date of Receipt
	Mailing Address 875 ALEXANDRIA CT			0 6 2 4 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24848
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing	С		192.30
	federal political committee.	C		132.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP HR	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		2499.90	1
	Other (specify)		2-700.00	1
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 147 / 220
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An or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of solicit solicit contributions from s	ing contributions such committee.
_	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) ROBERT PRITCHET			Date of Receipt	
	Mailing Address 135 HOLLYBERRY DRIV	VE		M M / D D D D 2 4	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24948
	HOPEWELL JUNCTION	NY	12533	Amount of Each Red	
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CON	n JTRACT ADMINISTRATION		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General			1	
	Other (specify) ▼		325.00		
3.	Full Name (Last, First, Middle Initial) MARK PROULX			Date of Receipt	
	Mailing Address 20 BRANDY RIDGE RO	AD		06 24	2006
	City	ty State Zip Code			C:A:25011
	SPARTA	NJ	07871	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHA	n ARMACY & CUST SVC OPS		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	1300.00		
 C.	Full Name (Last, First, Middle Initial) GILBERT RAINES			Date of Receipt	
	Mailing Address 800 SANDY TRAIL			06 / 24	2006
	City	State	Zip Code	Transaction ID: IN	C:A:25029
	KELLER	TX	76248	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00		
s	UBTOTAL of Receipts This Page (optional)				135.00
			•		
T	OTAL This Period (last page this line number or	nly)	>		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER	: PAGE 148/220	
	ITEMIZED RECEIPTS		or each category of the	(check only one)	¬ ¬
••	LIMIZED RECENT 10		Detailed Summary Page	X 11a 11b	11c 12 15 16 17
۸۰	y information copied from such Reports and St	otomonto moi	ret he cold or wood by any norse		
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from	n such committee.
	NAME OF COMMITTEE (In Full)				
\rangle	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC	5)
Α.	Full Name (Last, First, Middle Initial) FRANCES RAO			Date of Receipt	
	Mailing Address 146 JOHNSON RD	Otata	7'- 0-4-	06 2	
	CARCRALE	State	Zip Code	Transaction ID:	
	<u>SCARSDALE</u>	NY	10583	Amount of Each F	Receipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	PRIVACY		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		325.00		
	Other (specify)		1 1 1 1 1 1 1		
— В.	Full Name (Last, First, Middle Initial) JOANN REED			Date of Receipt	
	Mailing Address 4 ANTLER CT			06 2	2006
	City	State	Zip Code	Transaction ID:	NC:A:24938
	MATAWAN	NJ	07747	Amount of Each F	Receipt this Period
	FEC ID number of contributing federal political committee.	C			65.38
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINA	1 ANCE & CHIEF FIN OFFCR		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		849.94		
	Cities (Specify)		0 0 0 0 0 0 0		
<u>С</u> .	Full Name (Last, First, Middle Initial) THOMAS REINCKENS			Date of Receipt	
	Mailing Address 22 BARTLETT AVE.			06 2	
	City	State	Zip Code	Transaction ID:	
	NORWALK	CT	06850		Receipt this Period
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA			
	Receipt For:	Aggregate	e Year-to-Date ▼		
Primary General			225.00		
	Other (specify)	0 0	220.00		
	UBTOTAL of Receipts This Page (optional)		115.38		
\vdash	OBTOTAL OF Necelpts This Page (optional)		······································		• • • • • •
T	OTAL This Period (last page this line number of	only)	>		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 220 (check only one) X 11a 11b 11c 12 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) JOSEPH REYNOLDS Mailing Address 412 RIVER MEWS LANE			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City EDGEWATER	State NJ	Zip Code 07020	Transaction ID: INC:A:25026
	FEC ID number of contributing federal political committee.	C	07020	Amount of Each Receipt this Period 70.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		n R TECHNOLOGY e Year-to-Date ▼ 910.00	
Full Name (Last, First, Middle Initial) DAVID ROBARGE Mailing Address 4565 QUEENSLAND LN N			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:24756
	MINNEAPOLIS	MN	55446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		NICAL SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
).	Full Name (Last, First, Middle Initial) SORAYA RODRIGUEZ-BALZAC			Date of Receipt
	Mailing Address 22 PAPOOSE TRAIL			06 24 2006
	City ANDOVER	State NJ	Zip Code 07821	Transaction ID: INC:A:25025 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07021	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PUB	n ELIC AFFAIRS	
	Receipt For: ☐ Primary ☐ General Other (specify) ▼		e Year-to-Date ▼ 325.00	
s	UBTOTAL of Receipts This Page (optional)			120.00
т.	OTAL This Period (last page this line number on	lv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A	Full Name (Last, First, Middle Initial) MICHAEL ROMANZO Mailing Address 96 LEHMANN STREET City MAHWAH 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) DONNA ROSEN Mailing Address 7 RED OAK LANE		Zip Code 07430 n ENT SYSTEMED e Year-to-Date ▼	Date of Receipt M M M / 24 / 2006 Transaction ID: INC:A:24800 Amount of Each Receipt this Period 50.00 Date of Receipt
	Mailing Address 7 RED OAK LANE City KINNELON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼		Zip Code 07405	Transaction ID: INC:A:24949 Amount of Each Receipt this Period 50.00
D.	Full Name (Last, First, Middle Initial) RICHARD RUBINO Mailing Address 3103 RIO VISTA DRIVE City MAHWAH FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 07430 n ONTROLLER e 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
s	UBTOTAL of Receipts This Page (optional)		·····	185.00
т	OTAL This Period (last page this line number on	lv)	·····	

COLIEDIU E A (EEO Form OV)				FOR LINE NUMBER: PAGE 151 / 220
5(CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS	or each category of the		X 11a 11b 11c 12
			Detailed Summary Page	
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) STEVEN RUSSEK			Date of Receipt
	Mailing Address 21 SKY TOP RIDGE			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24817
	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 FORM	n MULARY & COVERAGE MG	SMT
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General	1 1	650.00	1
	Other (specify)		030.00	
В.	Full Name (Last, First, Middle Initial) MARY RYAN			Date of Receipt
	Mailing Address 456 RICHMOND AVEN	06 24 7 906		
	City	State	Zip Code	Transaction ID: INC:A:24937
	MAPLEWOOD	NJ	07040	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		78.34
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORI	n P REGULATORY AFFAIRS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		1010.40	1
	Other (specify) ▼		1018.42	
_	Full Name (Last, First, Middle Initial)			Date of Descipt
U .	CYNTHIA RYLANDS Mailing Address 4836 MIDDLE RD			Date of Receipt
	Walling Address 4636 MIDDLE RD			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24966
	ALLISON PARK	PA	15101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	INESS REQUIREMENTS	
	Receipt For:	1	Year-to-Date ▼	
	Primary General	35 -5-4		1
	Other (specify) ▼		225.00	
				1
	UPTOTAL of Descipto This Descriptoral		_	153.34
L	UBTOTAL of Receipts This Page (optional)			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 152 / 220	
ITEMIZED RECEIPTS		or each category of the	(check only one)	
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and Stater	nents may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the name	ne and add	aress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	ITICAL /	ACTION COMMITTEE (a.k.a	Madaa Haalth DAC\
	MEDCO HEALTH SOLUTIONS INC. POL	IIIGAL F	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
_	Full Name (Last, First, Middle Initial)			2. (2
Α.	MICHAEL SARDONE Mailing Address 7 AHERN WAY			Date of Receipt
	Walling Address / AFIENN WAT			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24835
	WEST ORANGE	NJ	07052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	MEDOO HE'AI TH SOLLITIONS	Dccupation	TECHNOLOGY	
			Year-to-Date ▼	
	Primary General		325.00	
	Other (specify)	0 0	323.00	
— В.	Full Name (Last, First, Middle Initial) DAVID SCHLETT			Date of Receipt
	Mailing Address 339 GRAMERCY PL			0 6 D D 7 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:24944
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	MEDOO HE'AI TH SOLLITIONS	Occupation /P ANAL	n LYTICAL SVCS	
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		650.00	
	Cuter (speerly) \	0 0	0 0 0 0 0 0 0	
C .	Full Name (Last, First, Middle Initial) FRANK SCHULTE			Date of Receipt
	Mailing Address 2121 AMERICA'S CUP CI	R		06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24796
	LAS VEGAS	NV	89117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		8.92
	MEDOO HE'NI TH COLLITIONS	Occupation /P/GM	1	
		Aggregate	Year-to-Date ▼	
	Primary General		223.00	
	Other (specify) ▼	0 0		1
s	UBTOTAL of Receipts This Page (optional)			83.92
T	OTAL This Period (last page this line number only))	>	

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 153 / 220	
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 13 14	11c 12 15 16 17	
Any or f	y information copied from such Reports and State or commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of solici solicit contributions from	iting contributions	
`	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) ALLEN SCHWARTZ Mailing Address 3556 DAVIS City EVANSTON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		Zip Code 60203 n R CLINICAL SVCS	Date of Receipt M M / D D O 6 2 4 Transaction ID: IN Amount of Each Re		
	Primary General Other (specify) ▼	7.tggrogato	325.00			
3.	Full Name (Last, First, Middle Initial) JEFFREY SCOTT Mailing Address 7330 EVEREST LANE - NORTH			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 MAPLE GROVE	State MN	Zip Code 55311	Amount of Each Re		
	FEC ID number of contributing federal political committee.	C		Amount of Lacritie	25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS		CT EXEC			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00			
	Full Name (Last, First, Middle Initial)			5 . (5		
	LEONARD SCOTT Mailing Address 2300 MCCUE ROAD - SU	JITE 212		Date of Receipt M M / D D 0 6 2 4	2006	
	City	State	Zip Code	Transaction ID: IN	IC:A:24875	
	HOUSTON	TX	77056	Amount of Each Re	eceipt this Period	
	FEC ID number of contributing federal political committee.	C			25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS		ACCT MGMT			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00			
SI	JBTOTAL of Receipts This Page (optional)		>		75.00	
TC	OTAL This Period (last page this line number onl	y)				

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 154 / 220
ITEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 17 18 17 18 17 18 17 18 17 18 18
Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
	TIAITIC AITU AU	aress or arry political committee to	Solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	Modes Health BAC)
WIEDCO REALTH SOLUTIONS INC. F	OLITICAL /	ACTION COMMITTIEE (a.K.a	i. Wedco Health FAC)
Full Name (Last, First, Middle Initial) A. ROBERT SENDEWICZ			Date of Receipt
Mailing Address 1220 CROSSING WAY			M M / D D / Y Y Y Y
			06 24 2006
City	State	Zip Code	Transaction ID: INC:A:24734
WAYNE	NJ	07470	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n FECHNOLOGY	
Receipt For:		Year-to-Date ▼	
Primary General	7 iggi ogait		1
Other (specify) ▼	0 0	325.00	
Full Name (Last, First, Middle Initial)			
B. THOMAS SHANAHAN Meiling Address OCC BRUCLIN CREEK	A\/⊏		Date of Receipt
Mailing Address 266 BRUSHY CREEK	AVE		06 24 2006
City	State	Zip Code	Transaction ID: INC:A:24859
LAS VEGAS	NV	89148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		28.85
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR OPS		
Receipt For:		e Year-to-Date ▼	
Primary General			1
Other (specify) ▼	0 0	490.45	
Full Name (Last, First, Middle Initial) C. JOHN SHEA			Date of Receipt
Mailing Address 62 FRANKLIN TURNP	IKE		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:24721
ALLENDALE	NJ	07401	Amount of Each Receipt this Period
FEC ID number of contributing	С		40.00
federal political committee.	<u> </u>		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST CO		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General	1 1	520.00	1
Other (specify)	0 0	520.00	
			20.07
SUBTOTAL of Receipts This Page (optional)		······	93.85
TOTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 155 / 220
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b] 11c 12
				13 14	15 16 17
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the i	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of solicity solicity solicity contributions from the solicity of the solici	ing contributions such committee.
\setminus	NAME OF COMMITTEE (In Full)				
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
A.	Full Name (Last, First, Middle Initial) FRANK SHEEHY			Date of Receipt	
	Mailing Address 119 HAMILTON RD			0 6 D D D 2 4	2006
	City	State	Zip Code	Transaction ID: IN	
	RIDGEWOOD	NJ	07450	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		1300.00		
В.	Full Name (Last, First, Middle Initial) PETER SHERMAN			Date of Receipt	
	Mailing Address 139 GATES AVENUE			06 24	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24708
	MONTCLAIR	NJ	07042	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	С			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MANAGI	n NG COUNSEL		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		650.00		
<u> </u>	Full Name (Last, First, Middle Initial) ELWOOD SIDES III			Date of Receipt	
	Mailing Address 150 CLAREMONT AVE			06 24	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24771
	LONG BEACH	CA	90803	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	325.00		
s	UBTOTAL of Receipts This Page (optional)				125.00
Т	OTAL This Period (last page this line number of	nly)	······································		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 156 / 220
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		· · · · · · · · · · · · · · · · · · ·	
MEDCO HEALTH SOLUTIONS INC. PC	DLITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) JEFFREY SIMEK			Date of Receipt
Mailing Address 197 OXFORD RD			06 24 7 2006
CHESTER	State NY	Zip Code	Transaction ID: INC:A:24843
CHESTER FEC ID number of contributing federal political committee.	C	10918	Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PUBL	IC AFFAIRS	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.03	
Full Name (Last, First, Middle Initial) 3. LEE SIMON			Date of Receipt
Mailing Address 2390 GREENVIEW ROA	A D		06 / 24 / 2006
City	State	Zip Code	Transaction ID: INC:A:24988
NORTHBROOK	IL	60062	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	1	L MGR GROUP	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	,
Other (specify)		650.00	
Full Name (Last, First, Middle Initial) JEFFREY SINKO			Date of Receipt
Mailing Address 10 CHERRY TREE LAN	E		06 24 2006
City	State	Zip Code	Transaction ID: INC:A:24869
KINNELON	NJ	07405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation COUNSE		
Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
Other (specify)		325.00	
SUBTOTAL of Receipts This Page (optional)			267.31
TOTAL This Period (last page this line number on	alv)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 157 / 220	
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b] 11c
			Detailed Summary Page	X 11a 11b 13 14	11c 12 15 16 17
Ar	ny information copied from such Reports and St	atements may	not be sold or used by any person	on for the purpose of solici	ting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from	such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /		Medco Health PAC)	
	WEDGO HEALTH GOLD HOND INC. 1	OLITIOAL 7	TOTION COMMITTEE (a.K.e	i. Weddo Health 1 AO)	
_	Full Name (Last, First, Middle Initial)			Data of Bassist	
Α.	WILLIAM SIRICO Mailing Address 564 DALE COURT EAS	2T		Date of Receipt	/ Y Y Y Y
	Maining Address 504 BALL COORT LAC	וס		0 6 2 4	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24732
	RIVER VALE	NJ	07675	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	С			30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		390.00		
	Curici (specify)	0 0		4	
В.	Full Name (Last, First, Middle Initial) DAVID SITVER			Date of Receipt	
	Mailing Address 24 YORKSHIRE AVE			0 6 D D D 2 4	2006
	City	State	Zip Code	Transaction ID: IN	C:A:24830
	SUFFERN	NY	10901	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	С			31.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		261.00]	
	Carici (specify)	0 0		4	
_	Full Name (Last, First, Middle Initial)			5. (5.).	
C.	ANN SMITH Mailing Address 437 GLENDALE RD			Date of Receipt	/ Y Y Y Y
	457 GLENDALE TID			0 6 2 4	2006
	City	State	Zip Code	Transaction ID: IN	
	WYCKOFF	NJ	07481	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		blic Affairs		
	Receipt For:	Aggregate	e Year-to-Date ▼	_	
	Primary General Other (specify) ▼	' '	325.00		
_				1	
s	UBTOTAL of Receipts This Page (optional)				86.00
\vdash	,				
T	OTAL This Period (last page this line number of	only)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 158 / 220
	TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar or	y information copied from such Reports and Stateme for commercial purposes, other than using the name	nents may e and addr	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	MEDCO HEALTH SOLUTIONS INC. POLIT	TICAL A	CTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) ROBERT SMITH			Date of Receipt
	Mailing Address 40 JOSHUA DR T			06 24 7 2006
	,	State	Zip Code	Transaction ID: INC:A:24964
		NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	MEDCO LEXITLI COLLITIONS	ccupation P OPS		
	Receipt For: A	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1300.00	
3.	Full Name (Last, First, Middle Initial) DAVID SNOW			Date of Receipt
	Mailing Address 23 CEDAR GATE ROAD			06 / 24 / 2006
	•	State	Zip Code	Transaction ID: INC:A:25018
		CT	06820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	MEDCO HE'ALTH SOLLITIONS	ccupation HAIRMA	N & CEO	
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		2500.03	
- C.	Full Name (Last, First, Middle Initial) ALAN SOKALER			Date of Receipt
	Mailing Address 30 MICHELLE WAY			06 24 2006
	,	State	Zip Code	Transaction ID: INC:A:25039
		NJ	07058	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	MEDCO HEALTH SOLUTIONS VE	ccupation P FINAN		
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	520.00	
s	UBTOTAL of Receipts This Page (optional)		······	282.31
<u> </u>	OTAL This Period (last nage this line number only)		·	
10	LILE LINE PERIOD (1261 DONE THE IND NUMBER ONLY)		-	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 220 (check only one) X 11a 11b 11c 12 13 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
/_ А .	Full Name (Last, First, Middle Initial) RALPH STAIANO Mailing Address 32 ALDEN RD City MONROE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) CHRISTOPHER STATEN Mailing Address 7 FOREST LAKE DR City WEST HARRISON FEC ID number of contributing	Aggregate State NY	Zip Code 10950 BUSINESS REQUIREMENTS Year-to-Date ▼ 325.00 Zip Code 10604	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation SR DIR F Aggregate		25.00
5.	Full Name (Last, First, Middle Initial) JILL STEARNS Mailing Address 13130 HALSELL DR City AUSTIN FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)		Zip Code 78732 CCT EXEC 9 Year-to-Date ▼ 325.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)		·····	75.00
т	OTAL This Period (last page this line number on	lv))	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 160 / 220
	EMIZED RECEIPTS		or each category of the	(check only one)]
			Detailed Summary Page	X 11a 11b 13 14	11c 12 15 16 17
An	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso		
or		me and add	tress of any political committee to	solicit contributions from s	such committee.
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)	
۹.	Full Name (Last, First, Middle Initial) CRAIG STEEL			Date of Receipt	
	Mailing Address 122 DEMAREST AVENU		7'- 0-4-	06 24	2006
	City EMERSON	State NJ	Zip Code 07630	Transaction ID: ING Amount of Each Rec	
	FEC ID number of contributing federal political committee.	C		Timodit of Edon no.	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC		-	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 325.00		
 3.	Full Name (Last, First, Middle Initial) SUSAN STEELE			Date of Receipt	
	Mailing Address 501 CONTINENTAL DR			06 24	2006
	City	State	Zip Code	Transaction ID: INC	
	SAGAMORE HILLS EEC ID number of contributing	OH	44067	Amount of Each Rec	
	FEC ID number of contributing federal political committee.	C			25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	325.00		
) .	Full Name (Last, First, Middle Initial) AMY STEINKELLNER			Date of Receipt	
	Mailing Address 1740 HIGHLAND DRIVE			06 24	2006
	City	State	Zip Code	Transaction ID: IN	
	ELM GROVE	WI	53122	Amount of Each Rec	
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SVCS		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		650.00		
s	UBTOTAL of Receipts This Page (optional)		·····		100.00
T	OTAL This Period (last page this line number onl	y)	>		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 161 / 220
	EMIZED RECEIPTS		or each category of the	(check only one)
• • •			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	
or 1	for commercial purposes, other than using the na	ame and add	lress of any political committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial)			
	GLEN STETTIN /			Date of Receipt
	Mailing Address 8 MILL GLEN CT			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25007
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing			100.00
	federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	7
	MEDCO HEALTH SOLUTIONS	SVP/GM	CLIN & THERAP SOL GRO	UP
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1300.00	
	Other (specify)			
	Full Name (Last, First, Middle Initial)			
	SCOTT STRATTON	<u></u>		Date of Receipt
	Mailing Address 351 TIMBERLANE DRIV	' L		06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25046
	ORANGE	CT	06477	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		7
			DUCT DEVELOPMENT	
		l	· · · · ·	
	Receipt For:	l	Year-to-Date ▼	
		l	Year-to-Date ▼ 650.00	
	Receipt For: Primary General	l		
	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	l		Date of Receipt
— C.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE	Aggregate		Date of Receipt
	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES	Aggregate	650.00	06 24 2006
C .	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City	Aggregate ROAD State	650.00 Zip Code	0 6 2 4 2 0 0 6 Transaction ID: INC:A:24751
C .	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City MARYSVILLE	Aggregate	650.00	06 24 2006
D .	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City MARYSVILLE FEC ID number of contributing	Aggregate ROAD State	650.00 Zip Code	0 6 2 4 2 0 0 6 Transaction ID: INC:A:24751
C .	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City MARYSVILLE FEC ID number of contributing federal political committee.	ROAD State OH	Zip Code 43040	Transaction ID: INC:A:24751 Amount of Each Receipt this Period
C .	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City MARYSVILLE FEC ID number of contributing	ROAD State OH C	Zip Code 43040	Transaction ID: INC:A:24751 Amount of Each Receipt this Period
C .	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City MARYSVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS	ROAD State OH C Occupation DIR CLIN	Zip Code 43040	Transaction ID: INC:A:24751 Amount of Each Receipt this Period
C .	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City MARYSVILLE FEC ID number of contributing federal political committee.	ROAD State OH C Occupation DIR CLIN	Zip Code 43040 CIICAL THERAPEUTICS Year-to-Date	Transaction ID: INC:A:24751 Amount of Each Receipt this Period
C .	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City MARYSVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	ROAD State OH C Occupation DIR CLIN	Zip Code 43040	Transaction ID: INC:A:24751 Amount of Each Receipt this Period
C .	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City MARYSVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	ROAD State OH C Occupation DIR CLIN	Zip Code 43040 CIICAL THERAPEUTICS Year-to-Date	Transaction ID: INC:A:24751 Amount of Each Receipt this Period
D.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City MARYSVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) Other (specify)	ROAD State OH C Occupation DIR CLIN Aggregate	Zip Code 43040 DICAL THERAPEUTICS Year-to-Date 325.00	Transaction ID: INC:A:24751 Amount of Each Receipt this Period 25.00
D.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) PATRICIA STRETE Mailing Address 19275 PAVER BARNES City MARYSVILLE FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General	ROAD State OH C Occupation DIR CLIN Aggregate	Zip Code 43040 DICAL THERAPEUTICS Year-to-Date 325.00	Transaction ID: INC:A:24751 Amount of Each Receipt this Period 25.00

SI	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 162 / 220
•		Use separate schedule(s) or each category of the		(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the a	atements may name and ado	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. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) COLEEN SULLIVAN			Date of Receipt
	Mailing Address 38 BARKMILL TERRAC	E		06 24 7 2006
	City	State	Zip Code	Transaction ID: INC:A:24989
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n PRODUCT DEVELOPMENT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		325.00	1
	Other (specify)	1 1		1
— В.	Full Name (Last, First, Middle Initial) CYNTHIA SULLIVAN			Date of Receipt
	Mailing Address 21 DENISE DRIVE			M M / D D / Y Y Y Y
				06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24946
	KINNELON	NJ	07405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL	n NCIAL PLANNING	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		650.00]
<u> </u>	Full Name (Last, First, Middle Initial) MARK SULLIVAN			Date of Receipt
	Mailing Address 821 SUMMIT 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:24719
	MANAKIN SABOT	VA	23103	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 CS S	1 SYSTEMS PLAN & IMPLEM	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		325.00	1
	Other (specify)	0 0	020.00	1
_	UDTOTAL (D. 11. TIL D. 11. TIL D.			100.00
S	UBTOTAL of Receipts This Page (optional)			-

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 163 / 220 (check only one)	
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			• •	13 14 15 16 17
Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. PC	LITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) IRENE SUTTON			Date of Receipt
	Mailing Address 374 KINGSTON CT			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24768
	WEST NEW YORK	NJ	07093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	1 FECHNOLOGY	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		325.00	
В.	Full Name (Last, First, Middle Initial) TIMOTHY SWETT			Date of Receipt
	Mailing Address 8362 GOLDEN PRAIRIE	DRIVE		06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24798
	TAMPA	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	685.00	
<u> </u>	Full Name (Last, First, Middle Initial) MARY THORSBY			Date of Receipt
	Mailing Address 17326 ELLEN DR			0 6 2 4 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24814
	LIVONIA	MI	48152	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR S	n SPECIAL MARKETS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 850.00	
s	UBTOTAL of Receipts This Page (optional)			150.00
-				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Α.	MEDOO HE'ALTH SOLLITIONS		Zip Code 07417 THE STEMS SUPPORT BY Year-to-Date ▼ 650.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Full Name (Last, First, Middle Initial) CLAUDIA TUCKER Mailing Address 713 INDIAN CREEK RD City AMHERST FEC ID number of contributing federal political committee.	State VA	Zip Code 24521	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	MEDOO HE'AI TH SOLLITIONS	• • • • • • •	n GOVERNMENT AFFAIRS Year-to-Date ▼ 975.00	
C.			Zip Code 08844 08844 ENT SVC DELIVERY Year-to-Date ▼	Date of Receipt M M M / 24 / 2006 Transaction ID: INC:A:24995 Amount of Each Receipt this Period 25.00
s	UBTOTAL of Receipts This Page (optional)		······	150.00
T	OTAL This Period (last page this line number only	v)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 165 / 220 (check only one) X
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) CARA VAN ZILE Mailing Address 31 LINCOLN RD City KINNELON FEC ID number of contributing federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS		LYTICAL SVCS	Date of Receipt M M D D Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00	
3.	Full Name (Last, First, Middle Initial) MICHELLE VANCURA Mailing Address W328 S4230 SPRING RI		7in Onda	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City WAUKESHA	State WI	Zip Code 53188	Transaction ID: INC:A:25058 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	Occupation VP ACCT Aggregate		
- .	Full Name (Last, First, Middle Initial) NICHOLAS VASILOPOULOS Mailing Address 105 ARRANDALE RD			Date of Receipt 0 6 2 4 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24857
	ROCKVILLE CENTRE FEC ID number of contributing federal political committee.	C	11570	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 ▼ 650.00	
S	UBTOTAL of Receipts This Page (optional)			95.00
T	OTAL This Period (last page this line number onl	v)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 166 / 220
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may	y not be sold or used by any perso	n for the purpose of soliciting contributions
	ame and add	aress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	NITICAL A		Medea Health PAC)
/ INIEDGO HEAETH SOLOTIONS INC. I C	JEITIOAL A	TOTION COMMITTEE (a.K.a.	Niedo Fieatti FAO)
Full Name (Last, First, Middle Initial) 4. GORDON VICKERS			Date of Receipt
Mailing Address 436 MOUNTAIN AVENU	IF.		M M / D D / Y Y Y Y
	,		06 24 2006
City	State	Zip Code	Transaction ID: INC:A:24705
WESTFIELD	NJ	07090	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	7
	1	CCT EXEC	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	' '	325.00	
(cpsss)/ \		0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial) 3. MUNISH VIJ			Date of Receipt
Mailing Address 2108 HENRY COURT			06 24 2006
City	State	Zip Code	Transaction ID: INC:A:25033
MAHWAH	NJ	07430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For:	1	e Year-to-Date ▼	1
Primary General		325.00	
Other (specify)	0 0	323.00	
Full Name (Last, First, Middle Initial) C. DANIEL WALDEN			Date of Receipt
Mailing Address 450 BEECHMONT DR			M M / D D / Y Y Y Y
			06 24 2006
City	State	Zip Code	Transaction ID: INC:A:24919
NEW ROCHELLE	NY	10804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
-			
		GULATORY & MC PROGRA e Year-to-Date ▼	
Primary General	, iggi ogale		
Other (specify)	0 0	2500.03	
SUBTOTAL of Receipts This Page (optional)		·····	242.31
TOTAL This Period (last nage this line number of	alv)		

S	CHEDULE A (FEC Form 3X)		Llas apparata aphadula(a)	FOR LINE NUMBER: PAGE 167 / 220
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•••	EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
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or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	itements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\vdash	NAME OF COMMITTEE (In Full)			
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
\angle				,
Α.	Full Name (Last, First, Middle Initial)			Data of Bassist
Α.	WILLIAM WALLACE Mailing Address 5445 GOODWIN AVEN	ПЕ		Date of Receipt
	Walling Address 5445 GOODWIN AVEN	UE		06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:25035
	DALLAS	TX	75206	Amount of Each Receipt this Period
	FEC ID number of contributing			192.31
	federal political committee.	C		192.31
	Name of Employer	Occupation	n	-
	Name of Employer MEDCO HEALTH SOLUTIONS		S SEGMENT LEADER	
	Receipt For:		e Year-to-Date ▼	
	Primary General		0500.00	
	Other (specify)	0 0	2500.03	
В.	Full Name (Last, First, Middle Initial) CALVIN WASDYKE			Date of Receipt
	Mailing Address 5 APPLE ORCHARD RI			M M / D D / Y Y Y Y
		_		06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24871
	MOORESTOWN	NJ	08057	Amount of Each Receipt this Period
	FEC ID number of contributing	С		12.50
	federal political committee.			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	7
		VP/GM		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	312.50	
	Ctrici (Specify)	1 1	0 0 0 0 0 0 0	
_	Full Name (Last, First, Middle Initial)			
C.	CATHERINE WASSON			Date of Receipt
	Mailing Address 26072 HARBOR VIEW			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24728
	CAPISTRANO BEACH	CA	92624	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	Name of Employer	Occupation	n	-
	Name of Employer MEDCO HEALTH SOLUTIONS	VP NATL		
	Receipt For:		e Year-to-Date ▼	1
	Primary General	1 1	650.00	
	Other (specify)		650.00	
_	L			<u> </u>
_	LIPTOTAL of Possints This Dave (series = 1)			254.81
\vdash	UBTOTAL of Receipts This Page (optional)		······	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 168 / 220
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
_			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and ado	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\geq	MEDCO HEALTH SOLUTIONS INC. POI	LITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) KELLY WEBBER			Date of Receipt
	Mailing Address 107 UPPER SADDLE RIV	/ER ROA	D	0 6 2 4 2 0 0 6
	City	State	Zip Code	Transaction ID: INC:A:24852
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CORI		_
	Receipt For:	Aggregate	e Year-to-Date ▼	1
	Primary General Other (specify) ▼		650.00	
3.	Full Name (Last, First, Middle Initial) TIMOTHY WENTWORTH			Date of Receipt
	Mailing Address 309 WATERVIEW DR			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24778
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES, C	n EO ACCREDO	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		2500.03	
	Full Name (Last, First, Middle Initial)			
Э.	KENNETH WERMES			Date of Receipt
	Mailing Address 26037 N WRANGLER RI)		06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24846
	SCOTTSDALE FEO. ID. and heavy and the street	AZ	85255	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	975.00	
s	UBTOTAL of Receipts This Page (optional)			317.31
_			<u> </u>	
T	OTAL This Period (last page this line number only	y)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 169 / 220 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or i	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) PETER WHITE Mailing Address 2241 E. PINCHOT AVE. #17F City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	PHOENIX FEC ID number of contributing federal political committee.	C	85016	Amount of Each Receipt this Period 20.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation DIR ACC Aggregate		
3.	Full Name (Last, First, Middle Initial) CHRISTOPHER WILSON Mailing Address 1 RIVER COURT APARTMENT 2809 City JERSEY CITY FEC ID number of contributing	State NJ	Zip Code 07310	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	receipt For: Primary Other (specify) ▼ Printing of Contributing federal political committee. Receipt For: Other (specify) ▼		n SULT SUPPORT e Year-to-Date ▼	50.00
Э.	Full Name (Last, First, Middle Initial) BEVERLY WINKLER Mailing Address 17 LYNWOOD RD City	State	Zip Code	Date of Receipt M M A 24 2006 Transaction ID: INC:A:24943
	VERONA FEC ID number of contributing federal political committee.	NJ	07044	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼	1	DRG DEV e Year-to-Date ▼ 325.00	
SI	JBTOTAL of Receipts This Page (optional)			95.00
T	OTAL This Period (last page this line number or			

SI	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 170 / 220				
,		Use separate schedule(s) or each category of the		(check only one)				
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
			2 otalied Gairmary 1 age	13 14 15 16 17				
Ar or	ly information copied from such Reports and St for commercial purposes, other than using the	atements may name and ado	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
abla	NAME OF COMMITTEE (In Full)							
\rangle	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)				
Α.	Full Name (Last, First, Middle Initial) MARILYN WOLLETT			Date of Receipt				
	Mailing Address 8174 MT AIR PL			06 24 7 2006				
	City	State	Zip Code	Transaction ID: INC:A:24879				
	COLUMBUS	OH	43235	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 RM PRACTICE					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General		625.00	1				
	Other (specify)		020.00	J				
— В.	Full Name (Last, First, Middle Initial) ANNA WONG			Date of Receipt				
	Mailing Address 64-20 BELL BLVD			M M / D D / Y Y Y Y				
	011	01-1-	7'- 0-4-	06 24 2006				
	City	State	Zip Code	Transaction ID: INC:A:25031				
	BAYSIDE	NY	11364	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 INSU	n RED SOLUTIONS					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General		650.00	7				
	Other (specify)	0 0	030.00	J				
<u> </u>	Full Name (Last, First, Middle Initial) JUDITH WOOD			Date of Receipt				
	Mailing Address 76 COLONIAL ROAD			0 6 2 4 2 0 0 6				
	City	State	Zip Code	Transaction ID: INC:A:24983				
	STILLWATER	NY	12170	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General		205.00	1				
	Other (specify)		325.00	1				
	IIDTOTAL of Docainto This Dans (antique)		-	100.00				
S	UBTOTAL of Receipts This Page (optional)							

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 171 / 220
ITEMIZED RECEIPTS			or each category of the	(check only one)	l 🗖
••			Detailed Summary Page	X 11a 11b 13 14	11c 12 15 16 17
۸۰	y information copied from such Reports and Sta	otomonto mo	reat he cold or wood by any norce		
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from s	uch committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
\mathbb{Z}				<u> </u>	
	Full Name (Last, First, Middle Initial)			Data of Danalat	
Α.	JORDAN WOUK Mailing Address 554 CLIMBERI AND AV	·-		Date of Receipt	
	Mailing Address 554 CUMBERLAND AV	E		06 24	2006
	City	State	Zip Code	Transaction ID: INC	C:A:25002
	TEANECK	NJ	07666	Amount of Each Rec	
	FEC ID number of contributing				· · · · · ·
	federal political committee.	C			25.00
	Name of Employer	Occupation	2	_	
	Name of Employer MEDCO HEALTH SOLUTIONS		HNOLOGY		
	Receipt For:		Year-to-Date ▼		
	Primary General			1	
	Other (specify)		325.00		
ь	Full Name (Last, First, Middle Initial) SERGEY YANITSKIY			Data of Daggint	
Ь.	Mailing Address 793 LINCOLN AVE			Date of Receipt	/ Y Y Y Y Y
	Walling Address 793 LINCOLN AVE			06 24	2006
	City	State	Zip Code	Transaction ID: INC	D:A:24763
	POMPTON LAKES	NJ	07442	Amount of Each Rec	
	FEC ID number of contributing				25.00
	federal political committee.	C			25.00
	Name of Employer	Occupation	 1	_	
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		205.00		
	Other (specify)		325.00		
C.	Full Name (Last, First, Middle Initial) SARAH YINGLING			Date of Receipt	
•	Mailing Address 901 ST MARKS AVE			M M / D D	/ Y
				06 24	2006
	City	State	Zip Code	Transaction ID: INC	D:A:24839
	WESTFIELD	NJ	07090	Amount of Each Rec	eipt this Period
	FEC ID number of contributing	С			25.00
	federal political committee.				
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	า		
	MEDCO HEALTH SOLUTIONS	DIR PRO	DUCT MGMT		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		325.00		
	Other (specify)				
0	UBTOTAL of Receipts This Page (optional)				75.00
\vdash	CD: OTAL OF FICOGRAPIS THIS Page (optional)		······································		
T	OTAL This Period (last page this line number o	only))		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 172 / 220 (check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.
<u>. </u>	NAME OF COMMITTEE (In Full)			
\rangle	MEDCO HEALTH SOLUTIONS INC. PO	LITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
۹.	Full Name (Last, First, Middle Initial) DANIEL ZELEM			Date of Receipt
	Mailing Address 219 SPOOK ROCK RD.			06 24 2006
	City	State	Zip Code	Transaction ID: INC:A:24903
	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	Occupation VP E-CO		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		650.00	
3.	Full Name (Last, First, Middle Initial) JILL ZELMAN			Date of Receipt
- .	Mailing Address 43604 EMERALD DUNES	S PL		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:24960
	LEESBURG	VA	20176	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 CON	n ISOLIDATION PLAN & RPR	- Г
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		267.28	
D .	Full Name (Last, First, Middle Initial) ANTHONY ZOLFO			Date of Receipt
	Mailing Address 726 HIGH MOUNTAIN Re	OAD		0 6 2 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC:A:25038
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CC	DUNSEL	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00	
s	UBTOTAL of Receipts This Page (optional)			100.00
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SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Other (specify)

PAGE 173 / 220 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) KELLY CASAGRAND Date of Receipt Mailing Address 12 POWDERHORN DR. 06 28 2006 City State Zip Code Transaction ID: INC:A:24334 **KINNELON** NJ 07405 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 C federal political committee. Name of Employer Occupation **HOMEMAKER** Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) B. LAIZER D. KORNWASSER Date of Receipt Mailing Address 393 EDGEWOOD AVE. 06 28 2006 City Zip Code State Transaction ID: INC:A:24335 **TEANECK** NJ 07666 Amount of Each Receipt this Period FEC ID number of contributing C 3600.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS IN-Occupation VP BUSINESS DEVELOPMENT AND RETAIL NET Receipt For: Aggregate Year-to-Date ▼ Primary General

3600.00

SUBTOTAL of Receipts This Page (optional)	•	5100.00
TOTAL This Period (last page this line number only)	<u> </u>	30382.46

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 220 (check only one) 11a 11b 11c 12 13 14 15 16 🔀 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and	may not be sold or used by any person d address 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. POLITICA	AL ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) BANK OF MARIN Mailing Address 50 MADERA BLVD.		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City State CORTE MADERA CA	e Zip Code 94925	Transaction ID: INC:A:24340 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	34323	98.97
Name of Employer Occup	pation	INTEREST EARNED
Receipt For: Primary Other (specify) ▼ Aggre	egate Year-to-Date ▼ 497.68	

SUBTOTAL of Receipts This Page (optional)	•	98.97
TOTAL This Period (last page this line number only)	<u> </u>	98.97

	CHEDULE B (FEC FOIII 3X)	Use seperate schedule(s)		FOR LIN check or	E NUMBE	iR:	Р	AGE	175 /	220
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1-	21b 27	22 28a	23 28b	24 28c	П	25 29	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name									,
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT	•								
۹.	Full Name (Last, First, Middle Initial) NIELSEN, MERKSAMER, PARRINELLO, M Mailing Address 591 REDWOOD HIGHWA		LLP			of Disbur			0 0 6	Y
	,	State Zip Code CA 94941			Amou	ınt of Eac	h Disburs	ement	this P	eriod
	Purpose of Disbursement LEGAL/ACCOUNTING FEES Candidate Name		Cat	01 egory/	<u> </u>				169.0	00
	Office Sought: House Senate President State: District:	ment For: Primary General Other (specify)		,,,,						
3.	Full Name (Last, First, Middle Initial) NIELSEN, MERKSAMER, PARRINELLO, N	MUELLER, & NAYLOR,	LLP			of Disbur				Υ
	Mailing Address 591 REDWOOD HIGHW	· 			0 6		1 4	2	0 ŏ 6	
	,	State Zip Code CA 94941		-	Amou	int of Eac	ch Disburs		this P 357.0	-
	LEGAL/ACCOUNTING FEES Candidate Name		Cat	egory/						
	Office Sought: Senate President State: Disburser	ment For: Primary General Other (specify)								
Э.	Full Name (Last, First, Middle Initial) BANK OF MARIN				Date	of Disbur				V
	Mailing Address 50 MADERA BLVD.				0 ^M 6	M / D	19	Ž	0 ŏ 6	Ť
	,	State Zip Code CA 94925			Amou	ınt of Eac	h Disburs	-		-
	Purpose of Disbursement SUPPLIES		-	01					102.5	64
	Candidate Name			egory/ ype						
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)								
s	UBTOTAL of Disbursements This Page (optional)			. •				16	28.5	4
T	OTAL This Period (last page this line number only)			. •		•	• • •			

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5(CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER:	PAGE	176 / :	220				
IT	EMIZED DISBURSEMENTS		(check onl		_		_				
•		Detailed Summary Page	21b	22 23 28b 28b	24 28c	25 29	_	26 30b			
•	16							300			
	y Information copied from such Reports and for commercial purposes, other than using t										
$\overline{}$	NAME OF COMMITTEE (In Full)										
\rangle	MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION COMMITTE	EE (a.k.a. I	Medco Health PAC)							
	Full Name (Last, First, Middle Initial)			Transaction ID: EX	(P·R·243)	 08					
٩.	NIELSEN, MERKSAMER, PARRINE	ELLO, MUELLER, & NAYLOR, LLF	ס	Date of Disbursement							
		,		M M / D D	/ Y Y	Y	Υ				
	Mailing Address 591 REDWOOD F	HIGHWAY., BLDG. 4000		06 / 27	2	0 0 6	_				
	City	State Zip Code		Amount of Each Dis	bursemen	t this P	erio	d d			
	MILL VALLEY	CA 94941					-				
	Purpose of Disbursement					432.5	0				
	LEGAL/ACCOUNTING FEES		001								
	Candidate Name		Category/								
			Type								
	Office Sought: House	Disbursement For:									
	Senate	Primary General									
	President	Other (specify)									
	State: District:										

SUBTOTAL of Disbursements This Page (optional)	•	432.50
TOTAL This Period (last page this line number only)	•	2061.04

SCHEDULE B (FEC Form 3X)

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 <u>`</u>	1b _	22 28a	X 23 28b	24 280	; <u> </u>	25 29	—	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									<u> </u>	
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political co	JIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	io soli	oit GOUTHI	JuliOHS II	om Such	COITIF	ınııee		
MEDCO HEALTH SOLUTIONS INC. POLI	FICAL ACTION COMMITT	EE (a.l	k.a. M	edco H	ealth PA	AC)				
Full Name (Last, First, Middle Initial) A. BATTLE BORN PAC					action ID f Disburs		3:238	57		
Mailing Address P.O. BOX 40366				06		2 /	Ý Ž	0 Ď 6	Y	
,	State Zip Code DC 20016			Amour	nt of Each	Disburs	emen	t this P	eriod	_
Purpose of Disbursement			_				Ę	5000.0	0	
Candidate Name GENERAL PURPOSE COMMITTEE		011 Category	//							
Office Sought: House Disburse	ment For:	Туре								
Senate President	Primary General Other (specify) ▼									
State: District: Full Name (Last, First, Middle Initial)				_		=>/==				—
3. ENSIGN FOR SENATE					ction ID f Disburs				V	
Mailing Address PO BOX 26568				0 6		เ 9ั	2	0 Ó 6		
,	State Zip Code NV 89126			Amour	nt of Each	Disburs			-	7
Purpose of Disbursement		011					1	0.000.0	00	_
Candidate Name JOHN ERIC ENSIGN		Category Type	//							
	ment For: 2006 Primary General Other (specify) ▼									
State: NV District:	·									
Full Name (Last, First, Middle Initial) ENSIGN FOR SENATE					action ID f Disburs	ement	3:242	63		
Mailing Address PO BOX 26568				0 6	/ D	9 /	Ý Ž	0 Ď 6	Y	
	State Zip Code NV 89126			Amour	nt of Each	Disburs			-	_
Purpose of Disbursement							5	5000.0	00	_
Candidate Name JOHN ERIC ENSIGN		Category Type	//							
Office Sought: House X Senate President State: NIV District:	ment For: 2006 Primary X General Other (specify)									
State: NV District:				_						_
SUBTOTAL of Disbursements This Page (optional) .			<u> </u>	<u></u>	•		11	0.000	0	_
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SCHEDULE B (FECFOIIII 3X)	Use seperate schedule(s)	FOR LINE I		220
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 24 25 28a 28b 28c 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				;
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI				
Full Name (Last, First, Middle Initial) EVERY REPUBLICAN IS CRUCIAL AKA E Mailing Address 25 E. MAIN ST., SUITE 2			Transaction ID: EXP:B:24259 Date of Disbursement O 6 Y Y Y Y O O 6	Y
,	State Zip Code VA 23219		Amount of Each Disbursement this P	
Purpose of Disbursement Candidate Name		011	5000.0	10
GENERAL PURPOSE COMMITTEE		ategory/ Type		
Senate President State: District:	Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) 3. FRIENDS OF HILLARY			Transaction ID: EXP:B:24258 Date of Disbursement	
Mailing Address 1717 K STREET, NW, SI			0 6 M / D 1 9 / Y 2 0 0 6	<u> </u>
,	State Zip Code DC 20036		Amount of Each Disbursement this P	-
Candidate Name HILLARY RODHAM CLINTON		011 ategory/ Type		
X Senate X President	ment For: 2006 Primary General Other (specify)			
State: NY District: Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS			Transaction ID: EXP:B:24260 Date of Disbursement	
Mailing Address POST OFFICE BOX 586			06 19 7 2006	Y
,	State Zip Code MT 59624		Amount of Each Disbursement this P	-
Candidate Name MAX BAUCUS		011 ategory/ Type		-
	ment For: 2008 Primary General Other (specify)	75-2		
SUBTOTAL of Disbursements This Page (optional) .		•	9000.0	0
TOTAL This Period (last page this line number only)		•		

SCHEDULE B (FEC Form 3X)

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b [27	22 28a	X 23 28b	24 28c		25 29	26 30b			
Any Information copied from such Reports and State or for commercial purposes, other than using the nan												
NAME OF COMMITTEE (In Full)	e and address of any political ce	J	<i>.</i> C 10 301	OIL COILLI	outions ii	OIII SUCII	COITIII	iiiioo				
MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMITT	ΓEE (a	.k.a. N	ledco H	ealth PA	(C)						
Full Name (Last, First, Middle Initial) A. HEATHER WILSON FOR CONGRESS				Transaction ID: EXP:B:24265 Date of Disbursement								
Mailing Address P.O. BOX 14070				0 6 M / 1 9 / Y 2 0 0 6 Y								
City ALBUQUERQUE	State Zip Code NM 87191			Amour	nt of Each	Disburs	-		-			
Purpose of Disbursement	Г	044					_ 1	0.000	0			
Candidate Name HEATHER A. WILSON		011 Catego	ry/									
Office Sought: X House Senate President State: NM District: 01	ement For: 2006 Primary X General Other (specify)											
Full Name (Last, First, Middle Initial)				Transa	action ID	: FXP:B	:2426	66				
3. JOHNSON FOR CONGRESS COMMITTI	Ε			Date o	f Disburs	ement			_			
Mailing Address P.O. BOX 1986				06	1	9 /	y y 2	0 ŏ 6	Y			
City NEW BRITAIN	State Zip Code CT 06050			Amour	nt of Each	Disburs						
Purpose of Disbursement		011			-		1	0.000	0			
Candidate Name NANCY L. JOHNSON		Catego	ory/									
Senate President	ement For: 2006 Primary X General Other (specify)											
State: CT District: 05 Full Name (Last, First, Middle Initial)						5\/D D	0.400					
MENENDEZ FOR SENATE					f Disburs	ement			V			
Mailing Address PO BOX 848				0 6		9 /	2	0 Ď 6				
City UNION CITY	State Zip Code NJ 07087			Amour	nt of Each	Disburs	ement	this P	eriod			
Purpose of Disbursement	[011					1	0.000	0			
Candidate Name ROBERT MENENDEZ		Catego	ry/									
Office Sought: House Disburs X Senate President State: NJ District:	ement For: 2006 Primary X General Other (specify)											
SUBTOTAL of Disbursements This Page (optional)			•			• • •	30	0.00	0			
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TOTAL This Period (last page this line number only)											

SCHEDULE B (FEC Form 3X)

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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X 23		24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									S
NAME OF COMMITTEE (In Full)	and address of any pointed CC	J1111111	10 8	JOHOIL GUITL	ibutiOil	3 110111	54611 60		
MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	EE	(a.k.a.	Medco H	Health	PAC)			
Full Name (Last, First, Middle Initial)							(P:B:24	1254	
NORTHUP FOR CONGRESS			Date of Disbursement M M M / D D D / 1 9						Y
Mailing Address P.O. BOX 7313				0 6		19		žoŏe	5
City LOUISVILLE	State Zip Code KY 40257			Amou	ınt of E	ach Dis	bursem	ent this F	Period
Purpose of Disbursement	Г		-	T L.				1000.0	00
Candidate Name		Cato 0.	gory/						
ANNE NORTHUP		Ту							
Office Sought: X House Disburse	ment For: 2006 Primary X General								
President	Other (specify)								
State: KY District: 3									
Full Name (Last, First, Middle Initial) PRYCE FOR CONGRESS						ı ID: EX urseme	(P:B:24 ent	1267	
Mailing Address 145 E. RICH STREET				0 ^M 6	M /	^D 1 9	/ Y	žoŏe	S Y
- 143 E. NION STREET									
City COLUMBUS	State Zip Code OH 43215			Amou	ınt of E	ach Dis	bursem	ent this F	Period
Purpose of Disbursement	Г			T L.				1000.0	00
Candidate Name		0°	gory/						
DEBORAH PRYCE		Ту							
Office Sought: X House Disburse Senate	ment For: 2006 Primary X General								
President	Other (specify)								
State: OH District: 15 Full Name (Last, First, Middle Initial)						F\	(D. D. C.	1001	
RED ROOSTER LEADERSHIP PAC						urseme	(P:B:24 ent	1264	
Mailing Address 228 S. WASHINGTON S	Т.			0 ^M 6	M /	19	/ Y	žoŏe	S ^Y
	State Zip Code VA 22314			Amou	ınt of E	ach Dis	bursem	ent this F	Period
Purpose of Disbursement	V// 22014		-					2500.0	00
Candidate Name GENERAL PURPOSE COMMITTEE		0° Cate Ty	gory/						
	ment For:	.,	<u> </u>						
Senate President	Primary General Other (specify) ▼								
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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	· —	24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	· ·					intec	
Full Name (Last, First, Middle Initial) TIBERI FOR CONGRESS Mailing Address 2021 E. DUBLIN GRANV	ILLE ROAD, SUI			tion ID: EXI	t	57 0 0 6	
	State Zip Code OH 43229		Amount	of Each Disb			-
Purpose of Disbursement Candidate Name PATRICK JOSEPH TIBERI		011 Category/	<u> </u>		1	000.00	0
	ment For: 2006 Primary X General Other (specify)	Туре	_				
Full Name (Last, First, Middle Initial) FRIENDS OF KENT CONRAD				tion ID: EXF	t		<u> </u>
Mailing Address PO BOX 812			0 6	21	′ 2	0 0 6	
BIŚMARK	State Zip Code ND 58502		Amount	of Each Disb		t this Pe	-
Purpose of Disbursement Candidate Name KENT CONRAD		011 Category/			<u> </u>	000.00	,
	ment For: 2006 Primary X General Other (specify)	Туре					
Full Name (Last, First, Middle Initial) JIM RAMSTAD VOLUNTEER COMMITTEE	<u> </u>		Date of D	tion ID: EXI	t	-	
Mailing Address 1809 PLYMOUTH ROAD	SOUTH, #310		06	[/] 2 1	Ž	0 0 6	
MINNETONKA	State Zip Code MN 55305		Amount	of Each Disb			-
Purpose of Disbursement Candidate Name		011	L		1	000.00)
JAMES M RAMSTAD		Category/ Type					
	ment For: 2006 Primary General Other (specify)						
SUBTOTAL of Disbursements This Page (optional) .		>			3	00.00	
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	y Information copied from such Reports and State												
or	for commercial purposes, other than using the nan	le and address of any politica	ı com	nn	iittee to	SOIIC	it contr	ibuti	ons tr	om s	sucn co	mmitte	
\rangle	MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMI	TTE	Ε	(a.k.a	a. Me	edco F	leal	th PA	AC)			
Α.	Full Name (Last, First, Middle Initial) TOGETHER FOR OUR MAJORITY PAC	(TOMPAC)					Date		sburs	eme	P:B:24		V
	Mailing Address P.O. BOX 16488						0 6	IVI /	2	23		žoŏ	6
	City ARLINGTON	State Zip Code VA 22215					Amou	nt of	Each	Dis	bursem		Period
	Purpose of Disbursement			Ç	11]		-				5000	0.00
	Candidate Name GENERAL PURPOSE COMMITTEE				egory/ ype								
	Office Sought: House Disburs	ement For: Primary General Other (specify) ▼											
В.	Full Name (Last, First, Middle Initial) BLUEGRASS COMMITTEE								on ID:		P:B:24	1330	
	Mailing Address 400 NORTH CAPITOL S	CTREET NW #585						M /		2 8	/ Y	žoŏ	6 Y
							-						
	City State Zip Code WASHINGTON DC 20001							nt of	Each	ı Dis	bursem		Period
	Purpose of Disbursement			C	11		L	-	-			2500	0.00
	Candidate Name GENERAL PURPOSE COMMITTEE				egory/ ype								
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)											
C.	Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS 2006								on ID:		P:B:24	1337	
	Mailing Address 5915 EASTMAN AVE.,	SUITE 100					0 ^M 6	M	^D 2	28	/ Y	žoŏ	6 ^Y
	City MIDLAND	State Zip Code MI 48640					Amou	nt of	Each	n Dis	bursem	ent this	Period
	Purpose of Disbursement			C	11]		_				1000	0.00
	Candidate Name DAVID LEE CAMP		Ca	at	egory/ ype	1							
	Senate >	ement For: 2006 Primary General Other (specify) ▼	I										
	State: MI District: 4						_	_					
s	UBTOTAL of Disbursements This Page (optional)				. 1	<u> </u>	Ŀ		<u> </u>			8500	.00
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	CHEDULE B (FEC Form 3	′ Use sepe	erate schedule(s)			INE NUMBER: PAGE 183 / 220 only one)									
IT	EMIZED DISBURSEMEN		category of the Summary Page		21b 27	22 28a	X 23	。 [24 28c	F	25 29		26 30b		
	y Information copied from such Reports a for commercial purposes, other than usin											ıs			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL AC	CTION COMMI	TTEE	(a.k.a.	Medco ł	lealth	PA(C)						
Α.	Full Name (Last, First, Middle Initial) PORTER FOR CONGRESS							Transaction ID: EXP:B:24336 Date of Disbursement 0 6 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	Mailing Address PO BOX 26087 City	State	Zip Code			Amount of Each Disbursement this Period									
	LAS VEGAS Purpose of Disbursement	NV	89126			2000.00									
	Candidate Name JON PORTER			01 Cate	gory/			^			•				
	Office Sought: X House Senate President State: NV District: 3	Disbursement For: X Primary Other (spe	2006 General	יעי	<u> </u>										
В.	Full Name (Last, First, Middle Initial) UPTON FOR ALL OF US						of Disbu	irsei	EXP:B:			V			
	Mailing Address P.O. BOX 490					0 6	IVI /	2	8 / [2	o ŏ e	3 '			
	City ST. JOSEPH	State MI	Zip Code 49085			Amou	ınt of Ea	ch I	Disburse	-	-	-	od		
	Purpose of Disbursement			01	1	1000.00									
	Candidate Name FREDERICK STEVEN UPTON			Cate:											
	Office Sought: X House Senate President State: MI District: 06	Disbursement For: X Primary Other (spe	2006 General												

		3000.00
SUBTOTAL of Disbursements This Page (optional)	•	3000.00
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S	CHEDULE B (FEC Form 3X)						AGE 184 /	220
IT	EMIZED DISBURSEMENTS	for each o	category of the Category Page	(check only 21b 27	22 23 28a 28		25 X 29	26 30b
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam							S
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI							
١.	Full Name (Last, First, Middle Initial) DALTON FOR NC SENATE				Transaction Date of Disbu	ursement	23820	
	Mailing Address 560 MAIN ST.				06	01	ŽOĎE	S Y
	City RUTHERFORDTON	State NC	Zip Code 28139		Amount of Ea	ach Disburse		
	Purpose of Disbursement			011			250.0	00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type				
	Senate X President	ement For: Primary Other (spe	2006 General cify) ▼					
3.	State: NC District: Full Name (Last, First, Middle Initial) FRED SMITH COMMITTEE				Transaction Date of Disbu		23825	
	Mailing Address 311 ATHLETIC CLUB BL	_VD.			06 /	01	Ž 0 Ŏ 6	S Y
	City CLAYTON	State NC	Zip Code 27520		Amount of Ea	ach Disburse	ement this F	Period
	Purpose of Disbursement			011			250.0	00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type				
	Senate X President	ement For: Primary Other (spe	2006 General cify) ▼					
_	State: NC District: Full Name (Last, First, Middle Initial)				Transaction	ID: EXP:B:	23823	
) .	GILLESPIE FOR NC HOUSE				Date of Disbu	ursement	, · y · y ·	Y
	Mailing Address 185 CROSS CREEK NO	RTH RIDG			0 6		ŽOĎG	
	City MARION	State NC	Zip Code 28752		Amount of Ea	ach Disburse		
	Purpose of Disbursement			011			100.0	00
	Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type				
	Senate X President	ement For: Primary Other (spe	2006 General					
	State: NC District:							
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SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check only		L	PAGE 18	5 / 220
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28	4 25 3c X 29	26 30b
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT					on committe	<u> </u>
Full Name (Last, First, Middle Initial) HARTSELL FOR NC SENATE Mailing Address 129 OVERBROOK DR.				ion ID: EXP:	B:23824	0 6 °
	State Zip Code NC 28025		Amount o	f Each Disbu		
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/			250	0.00
Office Sought: House Disburser Senate X	nent For: 2006 Primary General Other (specify)	Туре				
Full Name (Last, First, Middle Initial) SENATOR MARC BASNIGHT COMMITTEE	≣			ion ID: EXP:		′ ° Y
Mailing Address 220 HILLSBOROUGH ST			0 6	0 1	žoč	0.6
RÁLEIGH 1	itate Zip Code NC 27603		Amount o	f Each Disbu		s Period 0.00
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type	L	300	5.00	
	nent For: 2006 Primary General Other (specify)					
Full Name (Last, First, Middle Initial) SOLES FOR NC SENATE				ion ID: EXP:		· · · · ·
Mailing Address P.O. BOX 6			0 6	01	žoč	0.6
TÁBOR CITY 1	itate Zip Code NC 28463		Amount o	f Each Disbu		-
Purpose of Disbursement Candidate Name		011 Category/			230	0.00
NON-FEDERAL CONTRIBUTION		Type				
	nent For: 2006 Primary General Other (specify)					
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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check of 21b) 27	<u></u>	22 [28a	23 28b	24		25 29	26 30b
	y Information copied from such Reports and Statem										5
or	for commercial purposes, other than using the name	and address of any political	com	nittee to	SOIIC	t contri	butions i	rom suc	n com	nittee	
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT	FICAL ACTION COMMI	ГТЕЕ	E (a.k.a	a. Me	dco H	ealth P	AC)			
١.	Full Name (Last, First, Middle Initial) ANDY DILLON FOR STATE REPRESENTA	ATIVE				Date of	f Disburs			-	Y
	Mailing Address 26284 GRAHAM					06		05	2	0 Ď 6	
	,	State Zip Code MI 48239				Amour	nt of Eac	h Disbur	rsemen		-
	Purpose of Disbursement			011						250.0	00
	Candidate Name NON-FEDERAL CONTRIBUTION		Ca	tegory/ ype							
		ment For: 2006 Primary General Other (specify)									
2	Full Name (Last, First, Middle Initial)							: EXP:	B:238	35	
٠.	COMMITTEE TO ELECT DAVID LAW					M	f Disburs	sement 0 5	YYY	, o o	Υ
	Mailing Address 8627 COOLEY LAKE RD					0 6		0.5	2	0 Ó 6	
	,	State Zip Code MI 48382				Amour	nt of Eac	h Disbur	rsemen	t this P	eriod
	Purpose of Disbursement			011						500.0	00
	Candidate Name NON-FEDERAL CONTRIBUTION		Ca	tegory/ ype							
	Office Sought: Senate President State: MI Disburse X President	ment For: 2006 Primary General Other (specify)									
).).	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT FRANK ACCAVIT	rti						D: EXP:	B:238	28	
						0 6	f Disburs		YYY	0 0 6	Υ
	Mailing Address 15506 SOUTH PARK					-					
	,	State Zip Code MI 48021				Amour	nt of Eac	h Disbur	rsemen	t this P	eriod
	Purpose of Disbursement			011						250.0	00
	Candidate Name NON-FEDERAL CONTRIBUTION		Ca	tegory/ ype							
	Office Sought: Senate President State: MI Disburse X President	ment For: 2006 Primary General Other (specify)									
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SCHEDULE B (I LCI OIIII 3X)	Use seperate schedule(s)	FOR LINE NUMBER: PAGE 187/2. (check only one)					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28		26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						ns	
NAME OF COMMITTEE (In Full)	and address of any political co	ininitiee to so	iicit continbuti	Ons Hom suci	T COMMINICEE		
MEDCO HEALTH SOLUTIONS INC. POLI	FICAL ACTION COMMITT	EE (a.k.a. N	Medco Heal	th PAC)			
Full Name (Last, First, Middle Initial) A. COMMITTEE TO ELECT GRETCHEN WH	TMER		Date of Di	on ID: EXP:I sbursement	3:23851		
Mailing Address P.O. BOX 11063			06	05	žoŏ	6 ^Y	
,	State Zip Code MI 48910		Amount of	Each Disbur			
Purpose of Disbursement	I	011			500.	00	
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type					
Office Sought: Senate President State: MI District:	ment For: 2006 Primary General Other (specify)						
Full Name (Last, First, Middle Initial)			Transacti	on ID: EXP:l	3:23832		
3. COMMITTEE TO ELECT KATHY ANGERE	R		Date of Di	sbursement			
Mailing Address PO BOX 157			06	05	žoŏ	3 Y	
DÚNDEE	State Zip Code MI 48131		Amount of	Each Disbur			
Purpose of Disbursement		011			250.	00	
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type					
President	ment For: 2006 Primary General Other (specify) ▼						
State: MI District: Full Name (Last, First, Middle Initial)			T	ID- EVD-I	2.00040		
COMMITTEE TO ELECT MICHAEL SWITE	LSKI STATE SENATOR		Date of Di	on ID: EXP:I sbursement		Y	
Mailing Address 31412 GAY			0 6	05	žoŏ		
,	State Zip Code MI 48066		Amount of	Each Disbur	sement this	Period	
Purpose of Disbursement		011			500.	00	
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type					
Office Sought: Senate President State: MI District: Disburse X	ment For: 2006 Primary General Other (specify)						
SUBTOTAL of Disbursements This Page (optional) .					1250.	00	
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S	CHEDULE B (FEC Form 3X)	Use sene	rate schedule(s)						AGE 188	/ 220
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	y Information copied from such Reports and Staten for commercial purposes, other than using the nam									
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI									
۹.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT PHIL PAVLOV					Date o	f Disbur		:23838	
	Mailing Address P.O. BOX 160					0 6	/ D	05	žoŏ	6 ^Y
	City MARYSVILLE	State MI	Zip Code 48040			Amour	nt of Eac	h Disburs	ement this	Period
	Purpose of Disbursement)11	L.			250	.00
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ ype					
	Senate X President	ement For: Primary Other (spe	2006 General cify) ▼							
3.	State: MI District: Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT MICHELLE M	MCMANUS	<u> </u>				action II	D: EXP:B	:23846	
	Mailing Address P.O. BOX 1106						/ / D	05 /	žoŏ	6 ^Y
	City LANSING	State MI	Zip Code 48901			Amour	nt of Eac	h Disburs	ement this	Period
	Purpose of Disbursement)11				250	.00
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ ype					
	Senate X President	ement For: Primary Other (spe	2006 General cify)							
	State: MI District: Full Name (Last, First, Middle Initial)					Trono	oction IF	D: EXP:B	.02074	
Э.	ED GAFFNEY LEADERSHIP FUND						f Disbur	sement		Y
	Mailing Address 283 KENWOOD CT.					0 6	J L	05 /	žoŏ	6
	GROSS POINT FARMS	State MI	Zip Code 48236			Amour	nt of Eac	h Disburs	ement this	
	Purpose of Disbursement)11				250	.00
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ ype					
	Senate X President	ement For: Primary Other (spe	2006 General cify) ▼							
_	State: MI District:								750.	00
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	CHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s)	١ .		E NUMBE	∃R:	P	AGE 18	89 / 220
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check or 21b 27	22 28a	23 28b	24 28c	X 25	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name								
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI								
۹.	Full Name (Last, First, Middle Initial) FRIENDS OF ANDY MEISNER Mailing Address 14100 BALFOUR				_	saction ID of Disburs			0 6 °
	OÁK PARK	State Zip Code MI 48237			Amoi	unt of Each	n Disburs		
	Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		Ca	011 tegory/	L.			50	00.00
	Office Sought: House Disburse	ment For: 2006 Primary General Other (specify)		урс					
3.	Full Name (Last, First, Middle Initial) FRIENDS OF FRED MILLER					saction ID of Disburs	ement		V
	Mailing Address 230 NORTH AVE.				0 6		5 /	20	Ď 6 Š
	•	State Zip Code MI 48043			Amou	unt of Each	n Disburs		is Period 50.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Ca	011 tegory/ ype					
	9 🗎 –	ment For: 2006 Primary General Other (specify)							
Э.	Full Name (Last, First, Middle Initial) FRIENDS OF GERALD VANWOERKOM				Date	saction ID of Disburs	ement		
	Mailing Address 4216 HARBOR POINT				0 ^M 6	M / D	5 5	žo	0 6
	PÓRTLAND	State Zip Code MI 49081-1265			Amor	unt of Each	Disburs		is Period
	Purpose of Disbursement Candidate Name			011 tegory/				20	50.00
	NON-FEDERAL CONTRIBUTION	ment For: 2006		уре					
		Primary General Other (specify)							
s	UBTOTAL of Disbursements This Page (optional) .			▶				100	0.00
	OTAL This Period (last page this line number only)								

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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22	23 24 28b 28c	25 X 29	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						s	
NAME OF COMMITTEE (In Full)	and address of any political co	illillillee to soi	icit continbutio	DIIS ITOITI SUCII	Committee		
MEDGO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	EE (a.k.a. N	ledco Healt	h PAC)			
Full Name (Last, First, Middle Initial) FRIENDS OF LISA WOJNO				on ID: EXP:B sbursement	3:23840		
Mailing Address 27314 LAROSE			06	05	žoóe	S Y	
City WARREN	State Zip Code MI 48093		Amount of	Each Disburs		-	
Purpose of Disbursement	Г				250.0	00	
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type					
	ment For: 2006 Primary General Other (specify)						
Full Name (Last, First, Middle Initial) FRIENDS OF MIKE PRUSI				on ID: EXP:B	3:23847		
			M M /	05	ž o ŏ e	Y	
Mailing Address 1045 NORTH SHORE D			0 6				
City ISHPEMING	State Zip Code MI 49849		Amount of	Each Disburs	ement this F	Period	
Purpose of Disbursement		0.1.1			250.0	00	
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type					
· —	ment For: 2006 Primary General Other (specify)						
Full Name (Last, First, Middle Initial) FRIENDS OF STEVE TOBOCMAN				on ID: EXP:B	:23839		
Mailing Address P.O. BOX 9746			06	05 /	Ý ŽOÕ6	Y	
City DETROIT	State Zip Code MI 48237-9746		Amount of	Each Disburs	ement this F	Period	
Purpose of Disbursement	Г	011			500.0	00	
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type					
· —	ment For: 2006 Primary General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)					1000.0	00	
TOTAL This Period (last page this line number only)							

SCHEDULE B (I LOT OHII 3X)	Use seperate schedule(s)	(check on	: NUMBER:	L	PAGE 191	/ 220
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28	-	26 30b
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name						ns
NAME OF COMMITTEE (In Full)	and address of any political col		JOR GOIRIBU			
MEDCO HEALTH SOLUTIONS INC. POLIT	TICAL ACTION COMMITTI	EE (a.k.a.	Medco Hea	ulth PAC)		
Full Name (Last, First, Middle Initial) A. GILDA JACOBS FOR SENATE				tion ID: EXP:	B:23844	
GILDA JACOBS FOR SENATE			Date of L	Disbursement 0 5	YYY	Y
Mailing Address 8353 HENDRIE BLVD			0 6	0.5	žoŏ	6
,	tate Zip Code //I 48070		Amount	of Each Disbui	rsement this	Period
Purpose of Disbursement		* *			500.	00
Candidate Name		011				
NON-FEDERAL CONTRIBUTION		Category/ Type				
Office Sought: House Disburser Senate X	nent For: 2006 Primary General					
	Other (specify)					
State: MI District:						
Full Name (Last, First, Middle Initial) GO MIKE BISHOP				tion ID: EXP:	B:23841	
			M M	05	200	e Y
Mailing Address 883 GREAT OAK BLVD.			0 6	0.3	200	0
,	tate Zip Code //I 48307		Amount	of Each Disbui	rsement this	Period
Purpose of Disbursement	18887	•	-		500.	00
Candidate Name		011				
NON-FEDERAL CONTRIBUTION		Category/ Type				
Office Sought: House Disburser Senate X	nent For: 2006 Primary General					
	Other (specify)					
State: MI District:						
Full Name (Last, First, Middle Initial) HOUSE REPUBLICAN CAMAPAIGN COMI	MITTEE			tion ID: EXP: Disbursement	B:23876	
Mailing Address P.O. BOX 15035			0 6 M	/ D D /	y žoŏ	6 Y
,	tate Zip Code MI 48901		Amount	of Each Disbui	rsement this	Period
Purpose of Disbursement		011	<u> </u>		500.	00
Candidate Name		011 Category/				
NON-FEDERAL CONTRIBUTION		Туре	-			
Office Sought: House Disburser Senate	nent For: Primary General					
President	Other (specify)					
State: MI District:						
SUBTOTAL of Disbursements This Page (optional))			1500.	00
TOTAL This Period (last page this line number only) .						

SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only	-	PAGE 192 / 220
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 28b	24 25 26 28c X 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	e and address of any political co	Jillillillee to soi	icit contributions no	III Sucii committee
MEDGO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	EE (a.k.a. M	ledco Health PA	C)
Full Name (Last, First, Middle Initial) 4. JENNIFER M. GRANHOLM FOR GOVER	NOR		Transaction ID: Date of Disburse	ment
Mailing Address PO BOX 17127			06 / 0	5 / 2006
City LANSING	State Zip Code MI 48901		Amount of Each	Disbursement this Period
Purpose of Disbursement	Г	0.1.1		1000.00
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type		
	ment For: 2006 Primary General Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID:	EXP:B:23834
JOE HUNE FOR STATE REPRESENTATI	VE		Date of Disburse	
Mailing Address PO BOX 1095			06 / 0	5 2006
City FOWLERVILLE	State Zip Code MI 48836		Amount of Each	Disbursement this Period
Purpose of Disbursement	ΙΓ	011		250.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
· —	ment For: 2006 Primary General Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID:	 EXP:B:23843
JUD GILBERT FOR STATE SENATE			Date of Disburse	
Mailing Address P.O. BOX 15311			06 / 0	5 2006
City LANSING	State Zip Code MI 48901		Amount of Each	Disbursement this Period
Purpose of Disbursement	Г	044		250.00
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type		
	ment For: 2006 Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)				1500.00
TOTAL This Period (last page this line number only)				

<u>ا</u> ر	CHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s	()	FOR LINE		₹:	PAG	iE 193	/ 220
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check onl	y one)	□ 23	124 Г	7 25	□ 26
		, ,		27	28a	28b	28c	χ 29	30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name								ns
$\overline{\ }$	NAME OF COMMITTEE (In Full)								
\rangle	MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMM	ITTEI	E (a.k.a. I	Medco H	ealth PAC)			
	Full Name (Last, First, Middle Initial)				Tranca	action ID: E>	/D·R·20	3833	
۹.	KEVIN GREEN FOR STATE HOUSE					f Disburseme	_	3000	
	Mailing Address 4754 KAREL JEAN CT S	W			06	05	/ Y	žoŏ	6 ^Y
	,	State Zip Code MI 49509			Amour	nt of Each Dis	bursem	ent this	Period
	Purpose of Disbursement							250.	00
			_	011					
	Candidate Name NON-FEDERAL CONTRIBUTION		1	itegory/ Γype					
		ment For: 2006							
	Senate X President	Primary General Other (specify) ▼							
	State: MI District:								
3	Full Name (Last, First, Middle Initial) MARK SCHAUER FOR STATE SENATE					action ID: E>		3848	
	MARK SCHAUER FOR STATE SENATE				M N	f Disburseme	ent / Y	YY	Υ
	Mailing Address 1795 HAMILTON RD.				0 6	05	l L	žoŏ	6
	,	State Zip Code MI 49017			Amour	nt of Each Dis	bursem	ent this	Period
	Purpose of Disbursement							250.	00
	On All July Many		-	011					
	Candidate Name NON-FEDERAL CONTRIBUTION			tegory/ Type					
		ment For: 2006							
	Senate X President	Primary General Other (specify) ▼							
	State: MI District:	(-							
Э.	Full Name (Last, First, Middle Initial) MICHIGAN HOUSE DEMOCRATIC FUND					action ID: E〉 f Disburseme		3875	
	Moiling Address D.O. DOV 10100				0 6 M		/ Y	ž 0 ŏ	6 Y
	Mailing Address P.O. BOX 16193				0.0				
	,	State Zip Code MI 48901			Amour	nt of Each Dis	bursem	ent this	Period
	Purpose of Disbursement			• •				500.	00
	Candidate Name		_	011 itegory/					
	NON-FEDERAL CONTRIBUTION			Гуре					
	Office Sought: House Disburse Senate	ment For: Primary General							
	President	Other (specify)							
	State: MI District:								
s	UBTOTAL of Disbursements This Page (optional) .		<u></u>	•				1000.	00
T	OTAL This Period (last page this line number only)						•	•	
•	- I - I - I - I - I - I - I - I - I - I								

	CHEDULE B (FEC Form 3X)	Use sepe	erate schedule(s)	_	FOR LINE NUMBER: PAGE 194 / (check only one)				
IT	EMIZED DISBURSEMENTS	for each	category of the Ó Summary Page	21b	22 23 28a 28		25 X 29	26 30t	
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam							s	
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL								
۹.	Full Name (Last, First, Middle Initial) SENATE DEMOCRATIC FUND				Transaction Date of Disbu	ursement	:23853		
	Mailing Address P.O. BOX 11111				06 4	05	žoŏe	S ^Y	
	City LANSING	State MI	Zip Code 48901		Amount of Ea	ach Disburs			
	Purpose of Disbursement			011			500.0	00	
	Candidate Name NON-FEDERAL CONTRIBUTION			Category/ Type					
	Senate President	ement For: Primary Other (spe	General ecify) ▼						
3.	State: MI District: Full Name (Last, First, Middle Initial) SENATE REPUBLICAN CAMPAIGN CON	MITTEE			Transaction Date of Disbu		:23854		
	Mailing Address P.O. BOX 12023				06 /	05 /	žoŏe	S Y	
	City LANSING	State MI	Zip Code 12023		Amount of Ea	ach Disburs	ement this F	Period	
	Purpose of Disbursement Candidate Name			011 Category/			500.0	00	
	NON-FEDERAL CONTRIBUTION			Type					
	Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General ecify)						
	State: MI District: Full Name (Last, First, Middle Initial)					- 5/0.0			
Э.	TOM GEORGE FOR STATE SENATE				Transaction Date of Disbu	ursement		Y	
	Mailing Address P.O. BOX 1265				0 6	05	ŽOŎ6	6	
	City PORTAGE	State MI	Zip Code 49081		Amount of Ea	ach Disburs			
	Purpose of Disbursement Candidate Name			011			250.0	JU	
	NON-FEDERAL CONTRIBUTION		2000	Category/ Type					
	Senate X President	ement For: C Primary Other (spe	2006 General ecify) ▼						
	State: MI District:						• •		
s	UBTOTAL of Disbursements This Page (optional))	<u> </u>		1250.0	00	
T	OTAL This Period (last page this line number only	()		.					

SCIEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only	NUMBER:	L	AGE 195	220
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28c	25 X 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						s
NAME OF COMMITTEE (In Full)	and address of any political co	orininglee to soi	icit contributi	ons nom such	Committee	
MEDGO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	EE (a.k.a. M	ledco Healt	th PAC)		
Full Name (Last, First, Middle Initial) A. WAYNE KUIPERS FOR STATE SENATE			Date of Dis	on ID: EXP:Esbursement		V
Mailing Address 364 W. 31ST. ST.			06	05	žoŏe	3
City HOLLAND	State Zip Code MI 49423		Amount of	Each Disburs		
Purpose of Disbursement	I	011			500.0	00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
	ment For: 2006 Primary General Other (specify)					
Full Name (Last, First, Middle Initial)			Transaction	on ID: EXP:E	3:23861	
BILL DEWEESE CAMPAIGN COMMITTER				sbursement	V * V * V *	V
Mailing Address PO BOX 513			06	07	žoŏe	5 [*]
City HARRISBURG	State Zip Code PA 17108		Amount of	Each Disburs		-
Purpose of Disbursement		011			500.	JU .
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
Senate President	ment For: 2006 Primary X General Other (specify)					
State: PA District: Full Name (Last, First, Middle Initial)				- EVD 5		
CITIZENS FOR BACON				on ID: EXP:E sbursement		Υ
Mailing Address 5325 PONDEROSA DR.			0 6	0 7	žoŏe	
City COLUMBUS	State Zip Code OH 43231		Amount of	Each Disburs	sement this F	Period
Purpose of Disbursement		011			250.0	00
Candidate Name NON-FEDERAL CONTRIBUTION	-	Category/ Type				
Office Sought: House Disburse Senate President State: OH District:	ment For: 2006 Primary X General Other (specify)					
SUBTOTAL of Disbursements This Page (optional)					1250.0	00
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TOTAL This Period (last page this line number only)						

SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only		L	PAGE 19	96 / 220
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28		
Any Information copied from such Reports and Statemers or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT					TI COMMITTEE	
Full Name (Last, First, Middle Initial) DELUCA FOR LEGISLATURE COMMITTE Mailing Address 1438 HOMESTEAD ROA				ion ID: EXP: isbursement	B:23863	Ď 6 Š
	State Zip Code PA 15147		Amount o	f Each Disbu	rsement thi	is Period
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type			50	0.00
State: PA District:	nent For: 2006 Primary X General Other (specify) ▼					
Full Name (Last, First, Middle Initial) 3. DEMOCRATIC STATE SENATE CAMPAIG	N COMMITTEE			ion ID: EXP: isbursement		Y Y
Mailing Address P.O. BOX 3792			0 6	0 7	žo	0 6
HÁRRISBURG I	State Zip Code PA 17108		Amount o	f Each Disbu		o.00
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type			.,	
Office Sought: Senate President State: PA Disburser	nent For: Primary General Other (specify) ▼					
Full Name (Last, First, Middle Initial) FRIENDS OF BOB MELLOW			Date of D	ion ID: EXP:		
Mailing Address P.O. BOX B			0 6	07	žoč	Ď 6 Ť
PÉCKVILLE	State Zip Code PA 18452		Amount o	f Each Disbu		is Period 0.00
Purpose of Disbursement Candidate Name		011 Category/			100	0.00
NON-FEDERAL CONTRIBUTION Office Sought: House Disburser		Туре				
	Primary X General Other (specify) ▼					
SUBTOTAL of Disbursements This Page (optional)		<u>•</u>			2500	0.00
TOTAL This Period (last page this line number only)						

S	CHEDULE B (FEC Form 3X)	Use sene	erate schedule(s)		FOR LINE NUMBER: PAGE 197					/ 220
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		check only 21b 27	y one) 22 28a	23 28b	24 28c	25 X 29	26 30b
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam									
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL									
۹.	Full Name (Last, First, Middle Initial) FRIENDS OF JOE SCARNATI						Disburs		23865	
	Mailing Address P.O. BOX 792					0 6		7 /	ŽOŎ	6 ^Y
	City HARRISBURG	State PA	Zip Code 17108			Amour	t of Each	Disburse	ement this	Period
	Purpose of Disbursement			0	11	L.			500	.00
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ ype					
	Senate X President	ement For: C Primary Other (spe	2008 General							
_	State: PA District: Full Name (Last, First, Middle Initial)					Transa	ction ID:	:EXP:B:	23862	
э.	FRIENDS OF NICK MICOZZIE					Date of 0 6	f Disburs	ement	Ý 2 0 0	e Y
	Mailing Address PO BOX 234									
	CLIFTON HEIGHTS	State PA	Zip Code 19018			Amour	it of Each	Disburse	ement this	
	Purpose of Disbursement			Ō	11				500	.00
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ /pe					
	Office Sought: House Disburs Senate President	ement For: Primary Other (spe	2006 X General cify) ▼							
	State: PA District: Full Name (Last, First, Middle Initial)					-	ID	EVD.D.	00000	
Э.	HOUSE DEMOCRATIC CAMPAIGN COM	MITTEE					Disburs			Y
	Mailing Address P.O. BOX 555					0 6	C	7 /	ŽOŎ	6
	City HARRISBURG	State PA	Zip Code 17108			Amour	t of Each	Disburse	ement this	
	Purpose of Disbursement			0	11				1000	.00
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ /pe					
	Office Sought: House Disburs	ement For: Primary Other (spe	General ecify) ▼							
_								• • •	2000.	00
_ <u>S</u>	UBTOTAL of Disbursements This Page (optional)				<u>. ▶</u>	-	•	•	2000.	
т	OTAL This Period (last page this line number only	·)			•	1				

S	CHEDULE B (FEC Form 3X)	Use sene	erate schedule(s)		FOR LINE NUMBER: PAGE 19					/ 220
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	[(check onl 21b 27	y one) 22 28a	23 28b	24 28c	25 X 29	26 30k
	y Information copied from such Reports and Stater for commercial purposes, other than using the name									
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL AC	TION COMMI	TTE	E (a.k.a. I	Medco H	ealth P	AC)		
۹.	Full Name (Last, First, Middle Initial) HRCC 2006, INC.						f Disburs		23869	
	Mailing Address P.O. BOX 11787					06	/ D	7 /	žoŏ	6 ^Y
	City HARRISBURG	State PA	Zip Code 17108			Amour	nt of Each	n Disburse	ement this	Period
	Purpose of Disbursement			(011	L.			1000	.00
	Candidate Name NON-FEDERAL CONTRIBUTION				tegory/ ype					
	Senate President	ement For: Primary Other (spe	General cify) ▼							
3.	State: PA District: Full Name (Last, First, Middle Initial) JOSEPH MARKOSEK FOR STATE LEGI	SI ATOR					action ID	: EXP:B	23860	
	Mailing Address 1 WENTWORTH AVE.	OLATOIT				M M M M 0 6) 7 /	ž 0 Ŏ	6 ^Y
		Ctoto	Zin Codo							
	City PITTSBURG	State PA	Zip Code 15229			Amour	it of Each	1 Disburse	ement this	
	Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION				tegory/				250	.00
		ement For: Primary Other (spe	2006 X General	<u>'</u>	⁻ уре					
	State: PA District:									
Э.	Full Name (Last, First, Middle Initial) KEYSTONE LEADER'S PAC						f Disburs			V
	Mailing Address P.O. BOX 506					0 6	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	7 /	žoŏ	6
	City HARRISBURG	State PA	Zip Code 17108			Amour	nt of Each	n Disburse	ement this	
	Purpose of Disbursement				011	L.			1000	.00
	Candidate Name NON-FEDERAL CONTRIBUTION				tegory/ ype					
	Office Sought: Senate President State: PA Disburs Disburs Disburs	ement For: Primary Other (spe	General cify) ▼							
•	UBTOTAL of Disbursements This Page (optional)						•	• • •	2250.	00
	,				<u> </u>		•	• • •		
T	OTAL This Period (last page this line number only	′)			•					

SCHEDULE B (FEC Form 3X)	Use seperate schedule	(e) I -	FOR LINE NUMBER: PAGE 1997				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag	CITECK OIL	y one) 22 23 28a 28b	24 25 26 28c X 29 30b			
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL							
Full Name (Last, First, Middle Initial) LOGAN FOR SENATE			Date of Disbur				
Mailing Address P.O. BOX 935			06 / 0	07 7 2006			
City MONROEVILLE	State Zip Code PA 15146-093	35	Amount of Eac	ch Disbursement this Period			
Purpose of Disbursement		011	L	500.00			
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type					
Senate X President	ement For: 2008 Primary Genera Other (specify) ▼	al					
State: PA District: Full Name (Last, First, Middle Initial) OHIOANS FOR BLACKWELL			Transaction II Date of Disbur	D: EXP:B:23879			
Mailing Address 172 EAST STATE ST., #	<i>‡</i> 203		0 6 DISBUT				
City COLUMBUS	State Zip Code OH 43215		Amount of Eac	ch Disbursement this Period			
Purpose of Disbursement	011 43213	011		2500.00			
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type					
Senate President	ement For: 2006 Primary X Genera Other (specify)	al					
State: OH District: Full Name (Last, First, Middle Initial)				D: EXP:B:23872			
RENDELL FOR GOVERNOR Mailing Address 123 SOUTH BROAD ST	SUITE 1827		Date of Disbur	sement 0 7			
City	State Zip Code		Amount of Eac	ch Disbursement this Period			
PHILADELPHIA Purpose of Disbursement	PA 19109	1		1000.00			
Candidate Name		Category/					
NON-FEDERAL CONTRIBUTION Office Sought: House Disburs Senate President State: PA District:	ement For: 2006 Primary X General Other (specify)	Type					
SUBTOTAL of Disbursements This Page (optional)		>		4000.00			
TOTAL This Period (last page this line number only							

	STILL BOLL B (I LOT OTHI 5X)	Use seperate schedule(s	;)		-OR LINE check on	: NUMBE lv one)	:K:			PAG	iE 20	00 / 2	20
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		È	21b 27	22 28a	Н	23 28b	$\mathbf{\Box}$	24 28c	25 X 29		26 30b
	y Information copied from such Reports and Stater												
Or	for commercial purposes, other than using the named NAME OF COMMITTEE (In Full)	le and address of any politica	al COII	1111	illee to s	SHOIL COILL	ribut	Oris ir	om s	uch co	mmille	е	
\rangle	MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMM	ITTE	Ε	(a.k.a.	Medco I	leal	th PA	AC)				
Α.	Full Name (Last, First, Middle Initial) RENDELL FOR GOVERNOR					Date	of D	sburs	emer	P:B:20		Y Y	1
	Mailing Address 123 SOUTH BROAD ST	., SUITE 1827				0 6			7	L	ž 0 (0 6	
	City PHILADELPHIA	State Zip Code PA 19109				Amou	ınt o	f Each	n Disk	oursem	ent thi	s Pe	riod
	Purpose of Disbursement		Г	0	11	<u> </u>	-	_			150	0.00	
	Candidate Name NON-FEDERAL CONTRIBUTION		Ca	ate	egory/ /pe								
	Office Sought: Senate President State: PA Disburs Disburs Senate President	ement For: 2006 Primary X General Other (specify)	•										
В.	Full Name (Last, First, Middle Initial) SENATE REPUBLICAN CAMPAIGN COM	MITTEE						on ID sburs		P:B:20	3871		
	Mailing Address P.O. BOX 792					0 ^M 6	М	^D C	7	/ Y	ž 0 (Ď 6 [*]	
	City HARRISBURG	State Zip Code PA 17108				Amou	ınt o	f Each	n Disk	oursem		s Pe	-
	Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		Ca	011 Category/ Type									
	Office Sought: House Senate President State: PA District:	ement For: Primary General Other (specify)			•								
C.	Full Name (Last, First, Middle Initial) STRICKLAND FOR GOVERNOR							on ID sburs		P:B:20	3880		
	Mailing Address 42 PARK DRIVE					0 ^M 6	М	[′]	7	/ Y	ž 0 (Ď6 [°]	
	City COLUMBUS	State Zip Code OH 43209				Amou	ınt o	f Each	n Disk	oursem			-
	Purpose of Disbursement			0	11						250	0.00	
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ /pe								
	Senate President	ement For: 2006 Primary X General Other (specify)				-							
	State: OH District:										5004		
S	UBTOTAL of Disbursements This Page (optional)						•	•	•	-	5000	J.UU	+
T	OTAL This Period (last page this line number only	')			•	L.							

SCILDOLL B (I LOI OIII 3X)	Use seperate schedule(s)	(check only	-		PAGE	201 / 22	20
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 28b	24 Z8c X	25 29	26 30b
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITIONS					aon comm		
Full Name (Last, First, Middle Initial) VITALE FOR SENATE Mailing Address P.O. BOX 1467				ion ID: EXI	nt	4 0 0̇̃6 °]
	State Zip Code NJ 07095		Amount o	f Each Disk			-
Purpose of Disbursement Candidate Name		011 Category/				600.00	
NON-FEDERAL CONTRIBUTION Office Sought: House Senate President State: NJ District:		Туре					
Full Name (Last, First, Middle Initial) 3. ALAN SANBORN FOR SENATE				ion ID: EXI	nt	8 0 0 6 °	_
Mailing Address 27140 IRWIN RD.							
•	State Zip Code MI 48062		Amount o	f Each Disk		this Per 250.00	-
Candidate Name NON-FEDERAL CONTRIBUTION	C	011 category/ Type					
Office Sought: House Senate President State: MI District:	nent For: 2006 Primary X General Other (specify)						
Full Name (Last, First, Middle Initial) AMANDA RAGAN FOR IOWA SENATE			Date of D	ion ID: EXI	nt		
Mailing Address 20 GRANITE COURT SE			06	['] 30		0 0 6 °	
,	State Zip Code A 50401		Amount o	f Each Disk		this Per	-
Candidate Name NON-FEDERAL CONTRIBUTION	C	011 category/ Type					-
Office Sought: Senate President State: IA Disburser	nent For: 2006 Primary X General Other (specify)					_	
SUBTOTAL of Disbursements This Page (optional)		<u></u>			11	50.00	
TOTAL This Period (last page this line number only)							

S	CHEDULE B (FEC Form 3X)	Use sene	erate schedule(s)	FOR LINE NUMBER: PAGE 202					2 / 220	
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page][check onl 21b 27	y one) 22 28a	23 28b	24 28c	25 X 29	26 30k
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam									
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL									
۹.	Full Name (Last, First, Middle Initial) BEVERLY WOOLLEY CAMPAIGN					Date of	f Disburs		:24324	
	Mailing Address 4 EXBURY WAY					0 6) / D	3 0 /	žoŏ	6 Y
	City HOUSTON	State TX	Zip Code 77056			Amour	it of Each	Disburs	ement this	Period
	Purpose of Disbursement			Ö	11				1000	.00
	Candidate Name NON-FEDERAL CONTRIBUTION				egory/ ype					
	Senate President	ement For: Primary Other (spe	2006 X General							
_	State: TX District: Full Name (Last, First, Middle Initial)							: EXP:B	:24333	
٥.	CARLOS URESTI CAMPAIGN					M N	f Disburs	D /	YYYY	_ Y
	Mailing Address 9006 WALHALLA					0 6	3	30	žoŏ	6
	City SAN ANTONIO	State TX	Zip Code 78221			Amoun	t of Each	Disburs	ement this	
	Purpose of Disbursement			Ö	111				1000	.00
	Candidate Name NON-FEDERAL CONTRIBUTION			Cat	egory/ ype					
	Senate President	ement For: Primary Other (spe	2006 X General							
	State: TX District: Full Name (Last, First, Middle Initial)					T	-4i ID	. FVD.D	.04074	
Э.	CITIZENS FOR GRONSTAL						f Disburs			* V
	Mailing Address 220 BENNETT AVE.					0 6	<u> </u>	3 0 /	ŽOĎ	6
	City COUNCIL BLUFFS	State IA	Zip Code 51503			Amour	t of Each	Disburs	ement this	1 1
	Purpose of Disbursement			0	11				500	.00
	Candidate Name NON-FEDERAL CONTRIBUTION			Cat	egory/ ype					
	Office Sought: House Senate President State: IA District:	ement For: Primary Other (spe	2008 X General							
_							•	• • •	2500	-00
S	UBTOTAL of Disbursements This Page (optional)				<u> ▶</u>			• • •		.,,,
т	OTAL This Period (last page this line number only	·)								

SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only		L	PAGE 2	203 / 220
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 26		25 26 29 30b
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)	and address of any political co	illillillee to soi	icit continbut	10115 110111 500	JII COITIITIILI	lee
MEDCO HEALTH SOLUTIONS INC. POLIT	TICAL ACTION COMMITT	EE (a.k.a. N	ledco Hea	Ith PAC)		
Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT PATRICK ROSE			Date of D	ion ID: EXP: isbursement	:B:24319)
Mailing Address PO BOX 325			0 6	['] 30 [']	y žo	06
	tate Zip Code TX 78620		Amount o	f Each Disbu		
Purpose of Disbursement	lΓ	011			50	00.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
	nent For: 2006 Primary X General Other (specify)					
Full Name (Last, First, Middle Initial)			Transact	ion ID: EXP:	:B:24323	}
3. CORBIN VAN ARSDALE CAMPAIGN				isbursement		
Mailing Address 8904 FAIRBANKS N. HOU	JSTON		0 6	30	y žo	06°
,	tate Zip Code TX 77064		Amount o	f Each Disbu		
Purpose of Disbursement	lΓ	011			50	00.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
President	nent For: 2006 Primary X General Other (specify)					
State: TX District: Full Name (Last, First, Middle Initial)						
CRAIG ESTES CAMPAIGN				ion ID: EXP: isbursement		
Mailing Address P.O. BOX 8287			0 6	3 0		Ď6 [°]
,	tate Zip Code TX 76307		Amount o	f Each Disbu	rsement th	nis Period
Purpose of Disbursement		011			100	00.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
	nent For: 2008 Primary X General Other (specify) ▼					
SUBTOTAL of Disbursements This Page (optional)		<u> </u>			200	00.00
TOTAL This Period (last page this line number only) .						

SCHEDULE B (FEC Form 3X)	Use seperate schedule		E NUMBER:	PAGE 204 / 220
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag		22 23 28a 28l	24 25 26 28c X 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name.				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COM	MITTEE (a.k.a.	Medco Health I	PAC)
Full Name (Last, First, Middle Initial) A. DARRELL NOTTESTAD FOR DISTRICT	43 RE-ELECTION FUI	ND	Date of Disbu	
Mailing Address 2110 WESTWARD DR.			06 /	30 7 2006
City GRAND FORKS	State Zip Code ND 58201		Amount of Ea	ch Disbursement this Period
Purpose of Disbursement Candidate Name		011 Category/		200.00
NON-FEDERAL CONTRIBUTION Office Sought: House Disburs Senate President State: ND District:	ement For: 2006 Primary X Gener Other (specify)	Type		
Full Name (Last, First, Middle Initial) 3. DAVID DEWHURST COMMITTEE			Date of Disbu	
Mailing Address PO BOX 756			0 6 1	30 / 2006
City AUSTIN	State Zip Code TX 78767		Amount of Ea	ch Disbursement this Period
Purpose of Disbursement		011		2500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Office Sought: House Senate President State: TX District:	ement For: 2006 Primary X Gener Other (specify)	al		
Full Name (Last, First, Middle Initial) DIANNE DELISI CAMPAIGN			Date of Disbu	
Mailing Address P.O. BOX 3612			06 /	D 3 0
City TEMPLE	State Zip Code TX 76504		Amount of Ea	ch Disbursement this Period
Purpose of Disbursement		011	<u> </u>	1000.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Office Sought: Senate President State: TX Disburs Disburs Disburs	ement For: 2006 Primary X Gener Other (specify)	al		
SUBTOTAL of Disbursements This Page (optional)				3700.00
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	STIEDOLL B (I LOT OTTI 3X)	Use seperate sche			-OR LIN check o					PAGE	205 /	220	
IT	EMIZED DISBURSEMENTS	for each category of Detailed Summary		ĮĖ	21b 27		22 28a	23 28b	24		25 29	—	6 0b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name											3	
UI	NAME OF COMMITTEE (In Full)	and address of ally	Political COI	1111	iillee lo	SUIICIL	COLILID	uti0i15 11	om Suc	II COIIII	muee		
\rangle	MEDCO HEALTH SOLUTIONS INC. POLIT	FICAL ACTION C	OMMITTE	ΞE	(a.k.a.	. Med	dco He	alth PA	AC)				
۹.	Full Name (Last, First, Middle Initial) DON VIGESAA FOR DISTRICT 43 RE-ELE	ECTION FUND					Date of	Disburs				Y	
	Mailing Address 203 FAIRWAY DR. NW						06	3	3 0 /	2	0 ŏ 6		
	•	State Zip Coo ND 58425					Amount	of Each	n Disbur	semen		-	1
	Purpose of Disbursement		lг	0	11						200.0)0	_
	Candidate Name NON-FEDERAL CONTRIBUTION			Cate	egory/ ype								
	Office Sought: House Senate President State: ND District:		06 eneral										
_	Full Name (Last, First, Middle Initial)					1	Γransac	tion ID	: EXP:I	B:243	14		_
პ.	DONNA HOWARD CAMPAIGN							Disburs	ement				
	Mailing Address P.O. BOX 2124						06	/ D3	30	ÝŽ	0 0 6	Y	
	•	State Zip Coo TX 78767					Amount	of Each	n Disbur	semen			1
	Purpose of Disbursement			٥	11						500.0)0	_
	Candidate Name NON-FEDERAL CONTRIBUTION			Cate	egory/ ype								
	Office Sought: House Disburser Senate President State: TX District:		06 eneral										
	State: TX District: Full Name (Last, First, Middle Initial)					٠.	F	4: ID	. EVD.	D.040	00		—
Э.	DUAINE ESPEGARD FOR DISTRICT 9 RE	-ELECTION FUN	ND				Date of	Disburs				Υ	
	Mailing Address 3649 LYNWOOD CIRCLE						0 6		3 0 /		0 ŏ 6		
	•	State Zip Coo ND 58201					Amount	of Each	n Disbur	semen	t this F	eriod	
	Purpose of Disbursement		П	_	11						500.0	00	
	Candidate Name NON-FEDERAL CONTRIBUTION			Cate	egory/ ype								
	Office Sought: House Senate President State: ND District: Disburser		06 eneral										
s	UBTOTAL of Disbursements This Page (optional)				. •					. 1	200.0	0	Ī
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1	OTAL This Period (last page this line number only)			••••									1

SCHEDULE B (I LCI OIIII 3A)	Use seperate schedule(s)	(check only	NUMBER:		PAGE	206 / 220	1
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 28b	24 Z8c X	25 29	26 30b
Any Information copied from such Reports and Statemers or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT					uch comm	illee	
Full Name (Last, First, Middle Initial) DUANE MUTCH FOR DISTRICT 19 RE-EL Mailing Address PO BOX 416	ECTION FUND			ion ID: EXI	nt	1 0 0 6 °	
,	State Zip Code ND 58251		Amount o	of Each Disk	oursement	this Perio	d
Purpose of Disbursement Candidate Name		011 Category/				500.00	
NON-FEDERAL CONTRIBUTION Office Sought: House Senate President State: ND District:	nent For: 2006 Primary X General Other (specify)	Туре					
Full Name (Last, First, Middle Initial) FRIENDS OF JEFF MAYES			Date of D	ion ID: EXI	nt		
Mailing Address 4297 ZANDEN DR.			06	['] 30	, ž	0 0 6 °	
BÁY CITY I	State Zip Code MI 48706		Amount o	of Each Disk		this Perio	d
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type	L			200.00	
Office Sought: Senate President State: MI District: Disburser X	nent For: 2006 Primary General Other (specify)						
Full Name (Last, First, Middle Initial) FRIENDS OF KEVIN ELSENHEIMER			Date of D	ion ID: EXI	nt	-	
Mailing Address 1616 SOUTH LANSING S	ST.		06	['] 30	, y ž	0 0 6 °	
SŤ. JOHN'S	State Zip Code MI 48879		Amount o	of Each Disk		this Perio	d
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/				230.00	
Office Sought: House Disburser Senate	ment For: 2006 Primary General Other (specify)	Туре					
SUBTOTAL of Disbursements This Page (optional)		<u></u>			10	00.00	
TOTAL This Period (last page this line number only).							

	CHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s)			IE NUMBE	ER:	P	AGE 2	07 / 220	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	F	(check o 21b 27	22 28a	23 28b	24 28c	X 2		26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name				n for the p	urpose of s	solicating (contribu		
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT									
۸.	Full Name (Last, First, Middle Initial) GEORGE KEISER FOR DISTRICT 47 RE- Mailing Address 422 TORONTO DR.	ELECTION FUND			-	saction ID of Disburs			Ý 6 Y	
	BIŚMARCK	State Zip Code ND 58503			Amor	unt of Each	ı Disburs			d
	Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		Cat	011 egory/	L.			70	00.00	
	Office Sought: House Senate President State: ND District:	ment For: 2006 Primary X General Other (specify)		урс						
3.	Full Name (Last, First, Middle Initial) GIPP FOR REPRESENTATIVE COMMITT	EE				saction ID of Disburs	ement			
	Mailing Address 212 HIGH STREET				0 6		3 0 /	20	0 6	
	•	State Zip Code IA 52101			Amoi	unt of Each	n Disburse		nis Period	d
	Candidate Name NON-FEDERAL CONTRIBUTION		Cat	egory/						
	Office Sought: House Senate President State: IA District:	ment For: 2006 Primary X General Other (specify)								
Э.	Full Name (Last, First, Middle Initial) JERRY MADDEN CAMPAIGN				Date	saction ID of Disburs	ement			
	Mailing Address P.O. BOX 940844				0 ^M 6	M / D	3 0 /	ž0	0 6 °	
		State Zip Code TX 75094			Amo	unt of Each	n Disburs			d
	Purpose of Disbursement)11	T L.			50	00.00	
	Candidate Name NON-FEDERAL CONTRIBUTION			egory/ ype						
	Office Sought: House Disburser Senate President State: TX District:	ment For: 2006 Primary X General Other (specify)								
S	UBTOTAL of Disbursements This Page (optional)			▶				170	00.00	
T	OTAL This Period (last page this line number only)			. •						

SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only		PAGE 208/220
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 28a 28b	24 25 26 28c X 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nar				
or for commercial purposes, other than using the har NAME OF COMMITTEE (In Full)	ie and address of any political co	ommulee to so	TOTAL CONTINUE TO THE STREET	in such committee
MEDCO HEALTH SOLUTIONS INC. POI	ITICAL ACTION COMMITT	ΓΕΕ (a.k.a. N	Medco Health PA	C)
Full Name (Last, First, Middle Initial) A. JIM KURTENBACK FOR IOWA HOUSE			Transaction ID: Date of Disburse	ment
Mailing Address 26391 19TH STREET			06 / 3	0 / 2006
City NEVADA	State Zip Code IA 50201		Amount of Each	Disbursement this Period
Purpose of Disbursement	Γ	044		200.00
Candidate Name NON-FEDERAL CONTRIBUTION	l	011 Category/ Type		
Office Sought: House Senate President State: IA District:	ement For: 2006 Primary X General Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID:	EXP·B·24318
3. JOHN OTTO CAMPAIGN			Date of Disburse	
Mailing Address P.O. BOX 965			06 4 3	0 7 2006
City DAYTON	State Zip Code TX 77535		Amount of Each	Disbursement this Period
Purpose of Disbursement	1	011		500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type		
Senate President	ement For: 2006 Primary X General Other (specify)			
State: TX District: Full Name (Last, First, Middle Initial)				
JUDITH LEE FOR DISTRICT 13 RE-ELE	CTION FUND		Transaction ID: Date of Disburse	ment
Mailing Address 1822 BRENTWOOD C				0 2006
City WEST FARGO	State Zip Code ND 58078		Amount of Each	Disbursement this Period
Purpose of Disbursement	112 00070	011		200.00
Candidate Name NON-FEDERAL CONTRIBUTION	,	Category/ Type		
Office Sought: House Disburs Senate President State: ND District:	ement For: 2006 Primary X General Other (specify)			
SUBTOTAL of Disbursements This Page (optional				900.00
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SCILDOLL B (I LOI OIIII 3X)	Use seperate schedule(s)	(check on	: NUMBER: lv one)		PAGE 209	/ 220
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28		26 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam						is
NAME OF COMMITTEE (In Full)	e and address of any political co	illillillee to s	Uncit Continua	lions from Suc	ii committee	
MEDGO HEALTH SOLUTIONS INC. POL	TICAL ACTION COMMITT	EE (a.k.a.	Medco Hea	llth PAC)		
Full Name (Last, First, Middle Initial) A. KEL SELIGER CAMPAIGN				ion ID: EXP:	B:24332	
Mailing Address P.O. BOX 31748			0 6 M	/ D3 D /	2006	3 Y
City	State Zip Code		Amount of	of Each Disbur	rsement this	Period
AMARILLO	TX 79120-1748		-		1000.	00
Purpose of Disbursement	IΓ	011			1000.	00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
Senate President	ement For: 2008 Primary X General Other (specify)					
State: TX District:						
Full Name (Last, First, Middle Initial) KEVIN ELTIFE CAMPAIGN				ion ID: EXP: Disbursement	B:24327	
Mailing Address 112 S. COLLEGE			06	['] 30 0	^Y 2000	6 Y
City TYLER	State Zip Code TX 75702		Amount	of Each Disbur	rsement this	Period
Purpose of Disbursement	Г	011	L		1000.	00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
Senate President	ement For: 2006 Primary X General Other (specify)					
State: TX District:						
Full Name (Last, First, Middle Initial) KIRK ENGLAND CAMPAIGN			Date of D	ion ID: EXP: Disbursement	B:24312	
Mailing Address 3630 GREEN HOLLOW	DR.		06		žoŏe	3 Y
City GRAND PRAIRIE	State Zip Code TX 75052		Amount o	of Each Disbur	rsement this	Period
Purpose of Disbursement		011			500.	00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
Office Sought: Senate President State: TX Disburse	ement For: 2006 Primary X General Other (specify)					
SUBTOTAL of Disbursements This Page (optional)					2500.	00
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TOTAL This Period (last page this line number only)		•				

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			27	\perp	28a	28b			29		30b
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name										S	
NAME OF COMMITTEE (In Full)	and address of any pointed of										
MEDCO HEALTH SOLUTIONS INC. POLITIONS	FICAL ACTION COMMITT	TEE	(a.k.a.	Med	со Не	alth P	AC)				
Full Name (Last, First, Middle Initial)				Т	ransa	ction II	D: EXP:	B:242	94		
LAWRENCE KLEMIN FOR DISTRICT 47 F	RE-ELECTION FUND						sement		, , , ,	V	
Mailing Address 1709 MONTEGO DR.					0 ^M 6 M	/ D	3 0 /	2	0 ŏ 6	5	
•	State Zip Code ND 58503			A	moun	of Eac	h Disbu	rsemer	-		k
Purpose of Disbursement			'						200.0	00	
Candidate Name			11 egory/								
NON-FEDERAL CONTRIBUTION			pe								
Office Sought: House Disburser											
Senate President	Primary X General Other (specify) ▼										
State: ND District:	Caron (openity)										
Full Name (Last, First, Middle Initial)				Т	ransa	ction II	D: EXP:	B:242	75		
LUNDBY FOR IOWA SENATE							sement		, , , ,	V	
Mailing Address P.O. BOX 563				1 L	06	/ D	3 0 /	¥ 2	2 0 ŏ 6	s Y	
•	State Zip Code A 52302			A	moun	t of Eac	h Disbu	rsemer	nt this F	Perio	t
Purpose of Disbursement		-	-	1 L					500.0	00	
Candidate Name		_	11								
NON-FEDERAL CONTRIBUTION			egory/ /pe								
Office Sought: House Disburser											
Senate President	Primary X General Other (specify) ▼										
State: IA District:	Other (specify)										
Full Name (Last, First, Middle Initial)				Т	ransa	ction II	D: EXP:	B:243	17		
MANDO MARTINEZ CAMPAIGN							sement				
Mailing Address 1107 W. 4TH ST.				1 L	06	/ D	30	2	2 0 0 6	5	
	State Zip Code			А	moun	of Eac	h Disbu	rsemer	nt this F	Perio	t
WESLACO Purpose of Disbursement	TX 78596			- [500.0	00	П
- urpose of bisbursement		o	11			•	-				
Candidate Name NON-FEDERAL CONTRIBUTION			egory/ /pe								
Office Sought: House Disburser	ment For: 2006	٠,	po								
Senate	Primary X General										
President State: TX District:	Other (specify)										
State IX Significan				Г							=
SUBTOTAL of Disbursements This Page (optional)								1	200.0	00	
TOTAL This Period (last page this line number only)			_			•					\neg

SCIEDOLE B (I LCI OIIII 5X)	Use seperate schedule(s)	(check only		PAGE 211/220
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 28a 28b	24 25 26 28c X 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI				3uch committee
Full Name (Last, First, Middle Initial) MARK STRAMA CAMPAIGN Mailing Address P.O. BOX 270263			Transaction ID: EXDate of Disburseme	ent
City AUSTIN	State Zip Code TX 78727		Amount of Each Dis	sbursement this Period
Purpose of Disbursement		011		500.00
Candidate Name NON-FEDERAL CONTRIBUTION Office Sought: House Disburse	ment For: 2006	Category/ Type		
Senate President State: TX District:	Primary X General Other (specify)			
Full Name (Last, First, Middle Initial) MERLE BOUCHER FOR DISTRICT 9 RE-	ELECTION FUND		Transaction ID: E) Date of Disburseme	_
Mailing Address 606 HIGHLAND STREE	-		$\begin{bmatrix} 0 & 6 & M \\ 0 & 6 & M \end{bmatrix}$	['] 2006
RÓLETTE	State Zip Code ND 58366		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Candidate Name	[011 Category/		200.00
NON-FEDERAL CONTRIBUTION Office Sought: House Senate President State: ND District:	ment For: 2006 Primary X General Other (specify)	Туре		
Full Name (Last, First, Middle Initial) MURPHY FOR STATE REPRESENTATIV	=		Transaction ID: E) Date of Disburseme	ent
Mailing Address 155 NORTH GRANDVIE	W AVE		06 06 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	['] 2006
DÚBUQUE	State Zip Code IA 52001		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type		250.00
	ment For: 2006 Primary X General Other (specify)	. 100		
SUBTOTAL of Disbursements This Page (optional)		<u>}</u>		950.00
TOTAL This Period (last page this line number only)				

S	CHEDULE B (FEC Form 3X)	Use sene	erate schedule(s)		R LINE NUMBER: PAGE 212/22							
	EMIZED DISBURSEMENTS	for each Detailed	category of the Summary Page	2 2		22 28a	23 28b			26 30k		
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam											
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL											
۹.	Full Name (Last, First, Middle Initial) PETTINGILL FOR IOWANS						f Disbu	D: EXP:B	:24283			
	Mailing Address P.O. BOX 76					0 6	И / С	30 /	žoŏ	6 ^Y		
	City MOUNT AUBURN	State IA	Zip Code 52313			Amour	nt of Ead	ch Disburs	ement this			
	Purpose of Disbursement			011					200	.00		
	Candidate Name NON-FEDERAL CONTRIBUTION			Category Type	"/							
	Senate President	ement For: Primary Other (spe	2006 X General ecify) ▼									
3.	State: IA District: Full Name (Last, First, Middle Initial) RANDEL CHRISTMANN FOR DISTRICT:	33 FOR RI	E-ELECTION F	UND				D: EXP:B	:24297			
	Mailing Address 401 3RD AVE., NE					0 ^M 6	/ C	30 /	žoŏ	6 ^Y		
	City HAZEN	State ND	Zip Code 58545			Amour	nt of Ead	ch Disburs	ement this	Period		
	Purpose of Disbursement			011		L.			200	.00		
	Candidate Name NON-FEDERAL CONTRIBUTION			Category Type	"/							
	Senate President	ement For: Primary Other (spe	2006 X General ecify) ▼									
	State: ND District: Full Name (Last, First, Middle Initial)					Transa	action I	D: EXP:B	24276			
Э.	RANTS FOR STATE HOUSE, CHRISTOF	PHER				Date o	f Disbu	rsement		Υ		
	Mailing Address 2740 SOUTH GLASS S	TREET				0 6		30 /	žoŏ	6		
	City SIOUX CITY	State IA	Zip Code 51106			Amour	nt of Ead	ch Disburs	ement this			
	Purpose of Disbursement			011		L.			500	.UU		
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28		26 30b
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NAME OF COMMITTEE (In Full)	and address of any political co	illillillee to so	icit continbut	IONS HOM SUC	ii committe	U
MEDCO HEALTH SOLUTIONS INC. POLIT	TICAL ACTION COMMITT	EE (a.k.a. N	1edco Heal	th PAC)		
Full Name (Last, First, Middle Initial) A. RE-ELECT SENATOR RON JELINECK			Date of D	on ID: EXP:		· · · v
Mailing Address 7065 W. STICKLES RD.			0 6	⁷ 30 7	žoč	0.6
,	itate Zip Code MI 49128		Amount o	f Each Disbui		
Purpose of Disbursement	Г	011			250	0.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
	nent For: Primary General Other (specify)					
Full Name (Last, First, Middle Initial)			Transacti	on ID: EXP:	B:24289	
RE-ELECT WAYNE STENEHJEM			Date of D	isbursement	YYY	Υ
Mailing Address P.O. BOX 4151			0 6	3 0	žoč	0.6
,	state Zip Code ND 58504		Amount o	f Each Disbu		
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Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
President	nent For: 2006 Primary X General Other (specify)					
State: ND District: Full Name (Last, First, Middle Initial)					.	
RICK BERG FOR DISTRICT 45 RE-ELECT	ION FUND			on ID: EXP: isbursement		7 ° V
Mailing Address 1707 GOLD DRIVE			0 6	30	žoč	0.6
,	State Zip Code ND 58103		Amount o	f Each Disbui	rsement this	s Period
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	nent For: 2006 Primary X General Other (specify)					
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MEDCO HEALTH SOLUTIONS INC. P	DLITICAL ACTION COMMITT	TEE (a	.k.a.	Medco F	lealth F	PAC)			
Full Name (Last, First, Middle Initial)						D : EXP:B	:24305	5	
ROBBY COOK CAMPAIGN					of Disbur		V V	V ° \	/
Mailing Address P.O. BOX 716				0 6		30 /	20	Ó6	
City EAGLE LAKE	State Zip Code TX 77434			Amou	nt of Ead	ch Disburs		-	-
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ROBERT NICHOLS CAMPAIGN					of Disbu		Y Y	γ . \	7
Mailing Address 217 E. COMMERCE,	SUITE D			0 6		30 /	20	ó́6	
City JACKSONVILLE	State Zip Code TX 75766			Amou	nt of Ead	ch Disburs	ement t	his Pe	eriod
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President State: TX District:	Other (specify)								
Full Name (Last, First, Middle Initial)				Trans	action I	D: EXP:B	:24279)	
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Mailing Address 134 ORCHARD LANE	<u> </u>			0 ^M 6	M / C	30 /	Ý Ž0	Ó6	
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MEDCO HEALTH SOLUTIONS INC. PO	LITICAL ACTION COMMITT	ГЕЕ	(a.k.a.	Med	со Не	alth PA	AC)				
Full Name (Last, First, Middle Initial)							:EXP:B	:2429	93		
SCOT KELSH FOR DESTRICT 11 RE-E	LECTION FUND				ate of	Disburs		v • v	· · ·	V	
Mailing Address 1114 SOUTH 10TH ST					0 6 "]	3 0 /	2	0 Ó 6		
City FARGO	State Zip Code ND 58103			Α	mount	of Each	n Disburs	ement	t this F	erio	1
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SEYMOUR FOR SENATE						Disburs					
Mailing Address 901 WHITE STREET				7 [06	/ D	3 0 /	^Y ^Y 2	0 0 6	Y	
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MEDCO HEALTH SOLUTIONS INC. POL	TICAL ACTION COMMITT	EE (a.k.a.	Medco Hea	alth PAC)		
Full Name (Last, First, Middle Initial) THE HONORABLE GENE SEAMAN COM	MITTEE			tion ID: EXP		
Mailing Address 4825 OCEAN DRIVE			06	30	žoŏ	6 ^Y
City CORPUS CHRISTI	State Zip Code TX 78412		Amount	of Each Disbu	ursement this	Period
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Office Sought: House Disburse Senate President State: TX District:	ement For: 2006 Primary X General Other (specify)	71				
Full Name (Last, First, Middle Initial)			Transac	tion ID: EXP	:B:24329	
THE HONORABLE GLENN HEGAR				Disbursement		
Mailing Address P.O. BOX 1008			06	30	y žo o	6 ^Y
City KATY	State Zip Code TX 77492		Amount	of Each Disbu		
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Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type				
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Full Name (Last, First, Middle Initial)			Transaci	tion ID: EXP	·B·24226	
THE HONORABLE ROBERT DUNCAN CO	OMMITTEE			Disbursement		v V
Mailing Address PO BOX 2309			0 6	[′] 30 [′]	y žo ŏ	6
City LUBBOCK	State Zip Code TX 79408		Amount	of Each Disbu	ırsement this	Period
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Candidate Name NON-FEDERAL CONTRIBUTION	-	Category/ Type				
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MEDCO HEALTH SOLUTIONS INC. POLIT	TICAL ACTION COMMIT	TEE (a.k.a.	Medco Hea	Ith PAC)		
Full Name (Last, First, Middle Initial) THE HONORABLE TOM CRADDICK COM	MITTEE			ion ID: EXP:	B:24303	
Mailing Address 3108 STANDOLIND ST.			M M M 0 6	/ D D /	y y y y	6 ^Y
	7::- Cada			(Fack Disk		
	tate Zip Code X 79705		Amount o	of Each Disbu		
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3. TONY GOOLSBY CAMPAIGN			Date of D	isbursement		
Mailing Address 9 CHELTENHAM WAY			06	30	žoŏ	6 Y
•	tate Zip Code X 75230		Amount o	of Each Disbu		
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TONY GRINDBERG FOR DISTRICT 41 RE	ELECTION FUND		Date of D	ion ID: EXP:		
Mailing Address 2382 39 1/2 AVE SW			06	30	žoŏ	6
•	tate Zip Code ND 58104		Amount o	of Each Disbu	rsement this	Period
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	y Information copied from such Reports and State for commercial purposes, other than using the nan									
\rangle	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL									
۹.	Full Name (Last, First, Middle Initial) UPMEYER FOR HOUSE					Date of	f Disburs		24280	
	Mailing Address 2175 PINE AVENUE					0 6	/ D	30 /	žoó	6 ^Y
	City GARNER	State IA	Zip Code 50438			Amour	nt of Eac	h Disburs	ement this	Period
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, .	VICKI TRUITT CAMPAIGN Mailing Address P.O. BOX 886					Date of 0 6	f Disburs	sement	žoó	6 Y
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Э.	VILMA LUNA CAMPAIGN						f Disburs	sement		V
	Mailing Address P.O. BOX 6889					0 6		3 0 ′	žoŏ	6 '
	City CORPUS CHRISTI	State TX	Zip Code 78466			Amour	nt of Eac	h Disburs	ement this	
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$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITTI	EE (a.k.a. N	vledco Health PAC)
	Full Name (Last, First, Middle Initial)			Transaction ID: EXP:B:24304
۹.	WARREN CHISUM CAMPAIGN			Date of Disbursement
	Mailing Address P.O. BOX 2061			06 06 7 030 7 2006
	,	State Zip Code		Amount of Each Disbursement this Period
	PAMPA	TX 79066-2061		500.00
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	Candidate Name NON-FEDERAL CONTRIBUTION	C	Category/ Type	
	Office Sought: House Disburse	ement For: 2006		
	Senate	Primary X General		
	President	Other (specify)		
	State: TX District:			

SUBTOTAL of Disbursements This Page (optional)	•	500.00
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(Use separate schedule(s) for each

PAGE 220 / 220

FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** (check only one) 9 numbered line) X 10 **Excluding Loans** NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): NIELSEN, MERKSAMER, PARRINELLO, MUELLER, & NAYLOR, LLP LEGAL/ACCOUNTING FEES Mailing Address 591 REDWOOD HIGHWAY., BLDG. 4000 ZIP Code City State MILL VALLEY CA 94941 Outstanding Balance Beginning This Period Transaction ID: PAY:D:24246 1958.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1958.50 0.00 0.00 0.00 1) SUBTOTALS This Period This Page (optional)..... 0.00 2) TOTALS This Period (last page this line number only)..... 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)