

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
CVS/Caremark Corporation Employees PAC

ADDRESS (number and street) 1300 I Street, NW  
Suite 525 West  
 Check if different than previously reported. (ACC)  
Washington DC 20005

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

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

5. Covering Period 01 01 2010 through 01 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Heather A Cutler

Signature of Treasurer Electronically Filed by Heather A Cutler Date 04 08 2010

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 Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
CVS/Caremark Corporation Employees PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		97186.99
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	97186.99									
(c) Total Receipts (from Line 19) .....	20070.97	20070.97								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	117257.96	117257.96								
7. Total Disbursements (from Line 31) .....	87500.00	87500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	29757.96	29757.96								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

Write or Type Committee Name  
CVS/Caremark Corporation Employees PAC

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	4731.17	4731.17
(ii) Unitemized .....	15339.80	15339.80
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	20070.97	20070.97
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	20070.97	20070.97
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	20070.97	20070.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	20070.97	20070.97

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	84500.00	84500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	3000.00	3000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	87500.00	87500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	87500.00	87500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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 .....	20070.97	20070.97
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20070.97	20070.97
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lauren M Baldwin

Mailing Address 3415 Charleson Street

City Annandale State VA Zip Code 22003

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

Name of Employer Caremark, L.L.C Occupation VP Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 01 / 29 / 2010

**Transaction ID:** C874600

Amount of Each Receipt this Period 240.00

\* Payroll Deduction: BWK

**B.**

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

Mailing Address 307 Silvercreek Ct

City Franklin State TN Zip Code 37069

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

Name of Employer Caremark, L.L.C Occupation SVP Performance Optimization

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.67

Date of Receipt 01 / 12 / 2010

**Transaction ID:** C874665

Amount of Each Receipt this Period 216.67

\* Payroll Deduction: Monthly

**C.**

Full Name (Last, First, Middle Initial)  
NANCY R. CHRISTAL

Mailing Address 15 Rockinghorse Trl

City Rye Brook State NY Zip Code 10573-1006

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

Name of Employer CVS CAREMARK CORPORATION Occupation SENIOR VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 12 / 2010

**Transaction ID:** C874400

Amount of Each Receipt this Period 225.00

\* Payroll Deduction: Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **681.67**

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

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

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

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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Kenneth R Czarnecki	Date of Receipt MM / DD / YYYY 01 / 12 / 2010
	Mailing Address 7803 Purdue Street	<b>Transaction ID:</b> C874505
	City State Zip Code Dallas TX 75225	Amount of Each Receipt this Period 216.67
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Caremark, L.L.C	Occupation SVP Mail Pharmacies	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.67	* Payroll Deduction: Monthly

<b>B.</b>	Full Name (Last, First, Middle Initial) Sara Finley	Date of Receipt MM / DD / YYYY 01 / 12 / 2010
	Mailing Address 509 Close Lane	<b>Transaction ID:</b> C874667
	City State Zip Code Nashville TN 37205	Amount of Each Receipt this Period 216.67
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Caremark, L.L.C	Occupation EVP Gen Counsel CMK Pharm Svs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.67	* Payroll Deduction: Monthly

<b>C.</b>	Full Name (Last, First, Middle Initial) David W Golding	Date of Receipt MM / DD / YYYY 01 / 12 / 2010
	Mailing Address 1312 Oxford Ln	<b>Transaction ID:</b> C874622
	City State Zip Code Glenview IL 60025	Amount of Each Receipt this Period 292.50
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Caremark, L.L.C	Occupation EVP Specialty Pharmacy Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.50	* Payroll Deduction: Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>725.84</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) GORDON F. HOWARD</p> <p>Mailing Address 17 STEPHANIGA FARMS DRIVE</p> <p>City State Zip Code Stafford VA 22556</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CVS CAREMARK CORPORATION AREA VICE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">225.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">01 / 12 / 2010</span></p> <p><b>Transaction ID:</b> C874217</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">225.00</span></p> <p>* Payroll Deduction: Monthly</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) John David Joyner</p> <p>Mailing Address 1583 Main</p> <p>City State Zip Code Southlake TX 76092</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Caremark, L.L.C. EVP Sales &amp; Account Services</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">01 / 12 / 2010</span></p> <p><b>Transaction ID:</b> C874641</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">300.00</span></p> <p>* Payroll Deduction: Monthly</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) James C Luthin</p> <p>Mailing Address 8113 Koehler Drive</p> <p>City State Zip Code Orland Park IL 60462</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Caremark, L.L.C. EVP Operations</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">216.67</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">01 / 12 / 2010</span></p> <p><b>Transaction ID:</b> C874633</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">216.67</span></p> <p>* Payroll Deduction: Monthly</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">741.67</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

**A.** Full Name (Last, First, Middle Initial)  
Stuart McGuigan

Mailing Address 1 Cvs Dr

City State Zip Code  
Woonsocket RI 02895-6146

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
CVS Caremark SVP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 416.66

Date of Receipt 01 / 12 / 2010  
Transaction ID: C874315

Amount of Each Receipt this Period 416.66

\* Payroll Deduction: Monthly

**B.** Full Name (Last, First, Middle Initial)  
Diane B Nobles

Mailing Address 922 S. Beverly Lane

City State Zip Code  
Arlington Heights IL 60005

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Caremark, L.L.C SVP Compl & Integrity & CCO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 12 / 2010  
Transaction ID: C874638

Amount of Each Receipt this Period 416.00

\* Payroll Deduction: Monthly

**C.** Full Name (Last, First, Middle Initial)  
DENNIS N. PALMER

Mailing Address 9678 E Mountain Spring Rd

City State Zip Code  
Scottsdale AZ 85255-6639

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
CVS CAREMARK CORPORATION SENIOR VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 12 / 2010  
Transaction ID: C874310

Amount of Each Receipt this Period 225.00

\* Payroll Deduction: Monthly

**SUBTOTAL** of Receipts This Page (optional) ..... 1057.66

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 16

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

**A.**

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

Mailing Address 2451 Midtown Ave.  
Unit 503

City State Zip Code  
Alexandria VA 22303

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

Name of Employer Occupation  
Caremark, L.L.C SVP Government Affairs

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
416.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 2 / 2 0 1 0

Transaction ID: C874526

Amount of Each Receipt this Period

416.00

\* Payroll Deduction: Monthly

**B.**

Full Name (Last, First, Middle Initial)  
THOMAS M. RYAN

Mailing Address 135 Cliff Dr

City State Zip Code  
Narragansett RI 02882-1901

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

Name of Employer Occupation  
CVS CAREMARK CORPORATION PRESIDENT & CEO

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
416.66

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 2 / 2 0 1 0

Transaction ID: C874399

Amount of Each Receipt this Period

416.66

\* Payroll Deduction: Monthly

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Schofield

Mailing Address 32 Forest St

City State Zip Code  
Medfield MA 02052-3321

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

Name of Employer Occupation  
CVS/CAREMARK Manager, Transition Integration

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 5 / 2 0 1 0

Transaction ID: C852577

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1082.66

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 16  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

**A.**

Full Name (Last, First, Middle Initial) Mark Weeks		Date of Receipt MM / DD / YYYY 01 / 12 / 2010
Mailing Address 1007 Liberty Church Trail		<b>Transaction ID:</b> C874669
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 216.67
Name of Employer Caremark, L.L.C	Occupation SVP Controller CMK	* Payroll Deduction: Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.67	

**B.**

Full Name (Last, First, Middle Initial) HANLEY H. WHEELER		Date of Receipt MM / DD / YYYY 01 / 12 / 2010
Mailing Address 10706 Club Chase		<b>Transaction ID:</b> C874250
City Fishers	State IN	Zip Code 46037-9434
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer CVS CAREMARK CORPORATION	Occupation SENIOR VICE PRESIDENT	* Payroll Deduction: Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>441.67</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>4731.17</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

A.	Full Name (Last, First, Middle Initial) America's Health Insurance Plans PAC	Transaction ID: D92159 Date of Disbursement 01 / 21 / 2010
	Mailing Address 601 Penn. Avenue NW #500 South Bldg.	Amount of Each Disbursement this Period 2500.00
	City WASHINGTON State DC Zip Code 20004	
	Purpose of Disbursement Contributions to federal committees	Category/ Type
	Candidate Name America's Health Insurance Plans PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Blue Dog PAC	Transaction ID: D92160 Date of Disbursement 01 / 21 / 2010
	Mailing Address 6849 Old Dominion Drive Suite 222	Amount of Each Disbursement this Period 5000.00
	City McLean State VA Zip Code 22101	
	Purpose of Disbursement Contributions to federal committees	Category/ Type
	Candidate Name Blue Dog PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Cmte	Transaction ID: D92169 Date of Disbursement 01 / 21 / 2010
	Mailing Address 430 South Capitol Street SE	Amount of Each Disbursement this Period 15000.00
	City Washington State DC Zip Code 20003-4024	
	Purpose of Disbursement Contributions to federal committees	Category/ Type
	Candidate Name Democratic Congressional Campaign Cmte	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	22500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

<b>A.</b> Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE Mailing Address 120 Maryland Ave NE City Washington State DC Zip Code 20002-5610 Purpose of Disbursement Contributions to federal committees Candidate Name DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D92168 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 15000.00

<b>B.</b> Full Name (Last, First, Middle Initial) NATIONAL ASSOCIATION OF CHAIN DRUG STORES, INC. PA Mailing Address P. O. BOX 1417-D49 City ALEXANDRIA State VA Zip Code 22313 Purpose of Disbursement Contributions to federal committees Candidate Name NATIONAL ASSOCIATION OF CHAIN DRUG STORES, INC. PA Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D92163 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00

<b>C.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Cmte Mailing Address 320 First Street SE City Washington State DC Zip Code 20003-1838 Purpose of Disbursement Contributions to federal committees Candidate Name National Republican Congressional Cmte Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D92164 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 15000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	35000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) National Republican Senatorial Committee</p> <p>Mailing Address 425 2nd St NE</p> <p>City Washington State DC Zip Code 20002-4914</p> <p>Purpose of Disbursement Contributions to federal committees</p> <p>Candidate Name National Republican Senatorial Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D92171 <b>Date of Disbursement</b> 01 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 15000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) NATIONAL RETAIL FEDERATION RETAILPAC</p> <p>Mailing Address 325 SEVENTH STREET NW SUITE 1000</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement Contributions to federal committees</p> <p>Candidate Name NATIONAL RETAIL FEDERATION RETAILPAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D92170 <b>Date of Disbursement</b> 01 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) PCMA Political Action Committee</p> <p>Mailing Address 601 Pennsylvania Ave NW Ste 740</p> <p>City Washington State DC Zip Code 20004-2601</p> <p>Purpose of Disbursement Contributions to federal committees</p> <p>Candidate Name PCMA Political Action Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D92165 <b>Date of Disbursement</b> 01 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	22500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 16

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

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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

A.

Full Name (Last, First, Middle Initial)  
TUESDAY GROUP POLITICAL ACTION COMMITTEE

Transaction ID: D92167

Date of Disbursement

Mailing Address P. O. Box 11586

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	0

City Washington State DC Zip Code 20008

Amount of Each Disbursement this Period

2500.00
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Purpose of Disbursement  
Contributions to federal committees

--

Candidate Name  
TUESDAY GROUP POLITICAL ACTION COMMITTEE

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Chamber of Commerce

Transaction ID: D92161

Date of Disbursement

Mailing Address 1615 H Street NW

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	0

City Washington State DC Zip Code 20062

Amount of Each Disbursement this Period

2000.00
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Purpose of Disbursement  
Contributions to federal committees

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Candidate Name  
Chamber of Commerce

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00
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**TOTAL** This Period (last page this line number only) .....

84500.00
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
CVS/Caremark Corporation Employees PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Martin Nesbitt  Mailing Address 29 North Market Street  City Asheville State NC Zip Code 28801  Purpose of Disbursement Contributions to state candidates  Candidate Name Committee to Elect Martin Nesbitt  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D92162 Date of Disbursement 01 / 21 / 2010  Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Friends of Robert Garagiola  Mailing Address PO Box 442  City Germantown State MD Zip Code 20875  Purpose of Disbursement Contributions to state candidates  Candidate Name Friends of Robert Garagiola  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D92158 Date of Disbursement 01 / 07 / 2010  Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Strickland for Governor  Mailing Address 42 Park Dr  City Columbus State OH Zip Code 43209-1639  Purpose of Disbursement Contributions to state candidates  Candidate Name Strickland for Governor  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D92166 Date of Disbursement 01 / 21 / 2010  Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶

3000.00

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

3000.00