10/15/2010 12:33

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## FEC FORM 3X

FE6AN026

# 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) 2350 KERNER BLVD., SUITE 250 ADDRESS (number and street) Check if different than previously SAN RAFAEL CA 94901 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** 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) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) 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) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 09 0 1 2010 09 30 2010 through Covering Period 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 Electronically Filed by Jason D. Kaune 10 11 2010 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. 12/2004) Only

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2 / 438

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

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

D D 0 1 2010 09 2010 0.9 3 0 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 671416.04 January 1 (b) Cash on Hand at 723715.35 Begining of Reporting Period ..... 68834.94 611728.49 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 792550.29 1283144.53 6(a) and 6(c) for Column B) ..... 177719.75 668313.99 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 614830.54 614830.54 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

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

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

FE6AN026

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 438

Write or Type Committee Name

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

Report Covering the Period:

From:

м м

0 1

Y Y W Y 2010 n. 09

<sup>D</sup> 30

Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From:  a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	66454.00	511138.51
	(ii) Unitemized	2352.64	100346.69
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	68806.64	611485.20
(	b) Political Party Committees	0.00	0.00
`	c) Other Political Committees (such as PACs) d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	68806.64	611485.20
	ransfers From Affiliated/Other Party Committees	0.00	0.00
13. <i>F</i>	All Loans Received	0.00	0.00
	oan Repayments Received  Offsets To Operating Expenditures	0.00	0.00
(	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
t	o Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts Dividends, Interest, etc.)	28.30	243.29
-	ransfers 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
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	68834.94	611728.49
	otal Federal Receipts subtract Line 18(c) from Line 19)	68834.94	611728.49

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 438

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: — (a) Shared Federal/Non-Federal		1
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	710.75	2212.00
	Expenditures(c) Total Operating Expenditures	719.75	3313.99
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	719.75	3313.99
22.	Transfers to Affiliated/Other Party		
2	Committees Contributions to	0.00	0.00
О.	Federal Candidates/Committeesand Other Political Committees	172000.00	533000.00
4.	Independent Expenditure		
5	(use Schedule E)	0.00	0.00
J.	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
_		0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
о.	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	5000.00	132000.00
U.	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
81.	Total Disbursements (add Lines 21(c), 22,	1777/0 77	222212 55
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	177719.75	668313.99
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	177719.75	668313.99

## **DETAILED SUMMARY PAGE**

of Disbursements

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	68806.64	611485.20
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	68806.64	611485.20
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	719.75	3313.99
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	719.75	3313.99

FE6AN026

City HENDERSON NV 89044  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Full Name (Last, First, Middle Initial)  B. Full Name (Last, First, Middle Initial)  MS CARMEN BERG  Mailing Address P O BOX 1373  City MEDICAL LAKE WA 99022  FEC ID number of contributing federal political committee.  City MEDICAL LAKE WA 99022  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) C. Full Name (Last, First, Middle Initial)  MR ANDREW BIDINOTTO  Mailing Address 7728 GRACE DRIVE  City State Zip Code Ty Transaction ID: INC.A.86617  Amount of Each Receipt  M	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 6 / 438   (check only one)
MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial)  MS MICHELE AGNEW  Mailing Address 2433 ANDERSON PARK DRIVE  City  Name of Employer  MEDCO HEALTH SOLUTIONS  Cocupation  DIR HR  Receipt For:  Primary General  Other (specify) ▼  MEDICAL LAKE  MA 99022  FEC ID number of contributing federal political committee.  City  State Zip Code  MEDICAL LAKE  MA 99022  Transaction ID INC. A.85952  MEDICAL LAKE  WA 99022  Transaction ID INC. A.85952  Amount of Each Receipt this Period  MEDCO HEALTH SOLUTIONS  Date of Receipt  Mailing Address P O BOX 1373  City  State Zip Code  WA 99022  Transaction ID INC. A.86952  Amount of Each Receipt this Period  Transaction ID INC. A.86952  Amount of Each Receipt this Period  MEDCO HEALTH SOLUTIONS  Docupation  DIR PHARM PRACTICE  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  MR ANDREW BIDNOTTO  Mailing Address 7728 GRACE DRIVE  City  NORTH RICHAND HIL  TX 76182  FEC ID number of contributing federal political committee.  City  NORTH RICHAND HIL  TX 76182  Transaction ID INC. A.8617  Amount of Each Receipt this Period  Transaction ID INC. A.8617  Amount of Each Receipt this Period  12.5	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
MS MICHELE AGNEW  Mailing Address 2433 ANDERSON PARK DRIVE  City State Zip Code HENDERSON NV 89044  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR HR  Receipt For:  Other (specify) ▼  State Zip Code WA 99022  FUIL Name (Last, First, Middle Initial) MS CARMEN BERG Mailing Address P O BOX 1373  City State Zip Code WA 99022  MEDICAL LAKE WA 99022  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PHARM PRACTICE  Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIR PHARM PRACTICE  Primary General Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Date of Receipt Times Aggregate Year-to-Date T	1 1	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Mailing Address 2433 ANDERSON PARK DRIVE  City State Zip Code NV 89044  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Full Name (Last, First, Middle Initial) MS CARMEN BERG Mailing Address P O BOX 1373  City State Zip Code MEDICAL LAKE WA 99022  FEC ID number of contributing federal political committee.  C C Date of Receipt Transaction ID: INC.A. 865952  Amount of Each Receipt this Period Park No. 12.5  Date of Receipt Transaction ID: INC.A. 865952  Amount of Each Receipt this Period Park No. 12.5  Date of Receipt Transaction ID: INC.A. 865952  Amount of Each Receipt this Period Park No. 12.5  Date of Receipt Transaction ID: INC.A. 865952  Amount of Each Receipt this Period Park No. 12.5  Date of Receipt Transaction ID: INC.A. 865952  Amount of Each Receipt this Period Park No. 12.5  Primary General Other (specify) ▼ A87.50  Date of Receipt Transaction ID: INC.A. 86617  Aggregate Year-to-Date ▼ Transaction ID: INC.A. 86617  Transaction ID: INC.A. 86617  Aggregate Year-to-Date ▼ Transaction ID: INC.A. 86617  Amount of Each Receipt this Period Park No. 12.5  Date of Receipt Transaction ID: INC.A. 86617  Transaction ID: INC.A. 86617  Amount of Each Receipt this Period Park No. 12.5  Date of Receipt Transaction ID: INC.A. 86617  Amount of Each Receipt this Period Park No. 12.5  Date of Receipt Transaction ID: INC.A. 86617  Amount of Each Receipt this Period Park No. 12.5  Date of Receipt Transaction ID: INC.A. 86617  Amount of Each Receipt this Period Park No. 12.5  Primary General Park No. 12.5  Date of Receipt Transaction ID: INC. A. 86617  Amount of Each Receipt Transaction ID: INC. A. 86617  Amount of Each Receipt Transaction ID: INC. A. 86617  Amount of Each Receipt Transaction ID: INC. A. 86617  Amount of Each Receipt Transaction ID: INC. A. 86617  Amount of Each Receipt Transaction ID: INC. A. 86617  Amount of Each Receipt Transaction	, , , , , , , , , , , , , , , , , , , ,			Date of Receipt
City HENDERSON NV 89044  FEC ID number of contributing federal political committee.  Name of Employer MEDICAL LAKE WA 99022  FEC ID number of contributing federal political committee.  Name of Employer MEDICAL LAKE WA 99022  MEDICAL LAKE WA 99022  MEDICAL LAKE WA 99022  MEDICAL LAKE WA 99022  FEC ID number of contributing federal political committee.  Name of Employer MEDICAL LAKE WA 99022  FEC ID number of contributing federal political committee.  Name of Employer MEDICAL LAKE WA 99022  FEC ID number of contributing federal political committee.  Name of Employer MEDICAL LAKE WA 99022  FEC ID number of contributing federal political committee.  Name of Employer MEDICAL LAKE WA 99022  Amount of Each Receipt this Period WA 99022  Amount of Each Receipt this Period WA 99022  Amount of Each Receipt this Period WA 99022  Transaction ID: INC. A. 86592  Amount of Each Receipt this Period WA 99022  Amount of Each Receipt this Period WA 99022  Transaction ID: INC. A. 86617  Aggregate Year-to-Date ▼  Date of Receipt  NAME ANDREW BIDINOTTO  Mailing Address 7728 GRACE DRIVE  City State Zip Code TX 76182  FEC ID number of contributing federal political committee.  C 12.5	•	M M / D D / Y Y Y Y		
FEC ID number of contributing federal political committee.  Name of Employer MEDCO CHALTH SOLUTIONS    Primary	•		·	Transaction ID: INC.A.86581
Receipt For:	FEC ID number of contributing		89044	Amount of Each Receipt this Period
Receipt For:	Name of Employer MEDCO HEALTH SOLUTIONS		on	
Mailing Address P O BOX 1373  City State Zip Code WA 99022  FEC ID number of contributing federal political committee.  Name of Employer MEDICAL HAKE Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR ANDREW BIDINOTTO  Mailing Address 7728 GRACE DRIVE  City State Zip Code Transaction ID: INC.A.86952  Amount of Each Receipt this Period 12.5  Date of Receipt Tor:  Aggregate Year-to-Date ▼  Date of Receipt Tor:  Aggregate Year-to-Date ▼  Date of Receipt Transaction ID: INC.A.86952  Amount of Each Receipt this Period 12.5  Date of Receipt Transaction ID: INC.A.86952  Amount of Each Receipt this Period 12.5  Date of Receipt Transaction ID: INC.A.86617  Transaction ID: INC.A.86617  Amount of Each Receipt this Period 12.5  Date of Receipt Transaction ID: INC.A.86617  Amount of Each Receipt Transaction ID: INC.A.86617	Primary General	<del>- '</del>		
Mailing Address P O BOX 1373   City				Date of Receipt
MEDICAL LAKE  WA 99022  Amount of Each Receipt this Period C 12.5  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR ANDREW BIDINOTTO  Mailing Address 7728 GRACE DRIVE  Fig. 10 number of contributing federal political committee.  Fig. 11 Name (Last, First, Middle Initial) MR ANDREW BIDINOTTO  Mailing Address 7728 GRACE DRIVE  City State Zip Code Transaction ID: INC.A.86617  NORTH RICHLAND HIL TX 76182  FEC ID number of contributing federal political committee.  C 12.5  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼		M M / D D / Y Y Y Y		
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) MR ANDREW BIDINOTTO  Mailing Address 7728 GRACE DRIVE  PEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Occupation DIR PHARM PRACTICE  Aggregate Year-to-Date ▼  Date of Receipt  M M M O D D D D D D D D D D D D D D D D	•			
Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR ANDREW BIDINOTTO Mailing Address 7728 GRACE DRIVE  City State Zip Code NORTH RICHLAND HIL TX 76182  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Aggregate Year-to-Date ▼	FEC ID number of contributing		33022	12.50
Receipt For:    Primary   General   Aggregate Year-to-Date ▼	Name of Employer MEDCO HEALTH SOLUTIONS			
MR ANDREW BIDINOTTO  Mailing Address 7728 GRACE DRIVE  City State Zip Code  NORTH RICHLAND HIL TX 76182  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Date of Receipt  M M M O D D O 4 2 0 1  Transaction ID: INC.A.86617  Amount of Each Receipt this Period  12.5	Primary General	<del>- '</del>	e Year-to-Date ▼	
Mailing Address 7728 GRACE DRIVE  City State Zip Code  NORTH RICHLAND HIL TX 76182  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  State Zip Code  Transaction ID: INC.A.86617  Amount of Each Receipt this Period  12.5				Date of Receipt
NORTH RICHLAND HIL  TX 76182  Amount of Each Receipt this Period  TX 76182  C  12.5  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Amount of Each Receipt this Period  Doccupation BUSINESS PROCESS CHAMPION  Aggregate Year-to-Date  187.50				M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  C  12.5	· ·		•	
Receipt For:  Primary  General  Aggregate Year-to-Date  Aggregate Year-to-Date  Aggregate Year-to-Date	FEC ID number of contributing		70102	12.50
Primary General	Name of Employer MEDCO HEALTH SOLUTIONS			
	Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional) .	1		37.50

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO			Date of Receipt
	Mailing Address 26 DAYLILY DRIVE			09 04 7 2010
	City MOUNT LAUREL	State NJ	Zip Code	Transaction ID: INC.A.87098
	FEC ID number of contributing federal political committee.	C	08054	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP HR	on	
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 625.00	
Б.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 6527 SHORBURGH D	NDIVE		Date of Receipt
		09 04 2010		
	City INDIANAPOLIS	State IN	Zip Code 46278	Transaction ID: INC.A.86562  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	702.70	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	on ARM PRACTICE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 975.00	]
С. С.	Full Name (Last, First, Middle Initial) MS BARBARA CARIGAN			Date of Receipt
	Mailing Address 5589 W. TECO AVE.			0 9 0 4 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87089
	LAS VEGAS  FEC ID number of contributing federal political committee.	C	89118	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	on	
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 975.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
f	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR MARVEN CHIN			Date of Receipt
	Mailing Address 1604 SNOWBERRY D  City	H. State	Zip Code	0 9 0 4 2 0 1 0 Transaction ID: INC.A.87078
	WILLIAMSTOWN	NJ	08094	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR QUA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
В.	Full Name (Last, First, Middle Initial) MRS MARLENE CLEMENT			Date of Receipt
	Mailing Address 42 MESQUITE VILLAG	09 04 2010		
	City	State	Zip Code	Transaction ID: INC.A.86772
	HENDERSON	NV	89012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CUS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	]
С.	Full Name (Last, First, Middle Initial) MR JASON COLE			Date of Receipt
	Mailing Address 14917 E BELLA VISTA	1		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.86788
	VERADALE  FEC ID number of contributing federal political committee.	C	99037	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 975.00	
	SUBTOTAL of Receipts This Page (optional)			50.00
Ì	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
Mailing Address 4156 DUNMORE DRIV	E		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State	Zip Code	Transaction ID: INC.A.86876
LAKE WALES	FL	33859	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 975.00	
Full Name (Last, First, Middle Initial)  MR PATRICK DENNIS			Date of Receipt
Mailing Address 2344 FRENCH ALPS A	VE.		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.86697
HENDERSON	NV	89044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MS TAMARA DIDYK			Date of Receipt
Mailing Address 136 BEAVER RUN 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.86851
LAFAYETTE	NJ	07848	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ENT	n ERPRISE OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
SUBTOTAL of Receipts This Page (optional)			50.00

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

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 438 (check only one)    X
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	o solicit contributions from such committee.
∠ <b>4</b> .	Full Name (Last, First, Middle Initial) WILLIS DINGLE		,	Date of Receipt
	Mailing Address 905 SW SCRUB OAK			09 04 2010
	City PALM CITY	State FL	Zip Code 34990	Transaction ID: INC.A.86701  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 I		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
3.	Full Name (Last, First, Middle Initial)  MS LYNDA DOREMUS  Mailing Address 16 E HOMESTEAD AV	/E		Date of Receipt
	City	State	Zip Code	0 9 0 4 2 0 1 0  Transaction ID: INC.A.86822
	COLLINGSWOOD	NJ	08108	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n .RM PRACTICE	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) KELLY ELLIS Mailing Address 106 HENRY SEWALL	WAY		Date of Receipt
	City	State	Zip Code	0 9 0 4 2 0 1 0  Transaction ID: INC.A.87233
	STUART	FL	34996	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		MARKETING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Γ	SUBTOTAL of Receipts This Page (optional)			150.00

	EHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
Any or f	r information copied from such Reports and Sor commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
- I \	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA			Date of Receipt
İ	Mailing Address 2354 DOLPHIN CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City HENDERSON	State NV	Zip Code 89074	Transaction ID: INC.A.86806  Amount of Each Receipt this Period
Ī	FEC ID number of contributing federal political committee.	C	00074	15.00
Ī	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n .RM PRACTICE	
Ī	Receipt For:  Primary  General  Other (specify)		Year-to-Date ▼ 1359.51	
	Full Name (Last, First, Middle Initial) MR JOHN FORD			Date of Receipt
-	Mailing Address 6 SILVER LAKE DRIVI	0 9 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City SHAMONG	State NJ	Zip Code 08088	Transaction ID: INC.A.86825  Amount of Each Receipt this Period
Ī	FEC ID number of contributing federal political committee.	C		15.00
Ī	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
İ	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 585.00	
	Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt
-	Mailing Address 9 GREEN HILL TRAIL			M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O
	City TROPHY CLUB	State TX	Zip Code 76262	Transaction ID: INC.A.86880
	FEC ID number of contributing federal political committee.	C	70202	Amount of Each Receipt this Period
İ	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP NAT	n ΓΙΟΝΑL SERVICE CENTER	
Ī	Receipt For:  Primary General  Other (specify) ▼	-	e Year-to-Date ▼ 2896.10	
	UBTOTAL of Receipts This Page (optional)			130.00

## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any per le name and address of any political committee  POLITICAL ACTION COMMITTEE (a.k.	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS  Mailing Address 544 DENMOOR COL  City GALLOWAY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code OH 43119  C  Occupation DIR OPS  Aggregate Year-to-Date ▼  487.50	Date of Receipt  M M M / D D / Y Y Y Y Y Y  Transaction ID: INC.A.86624  Amount of Each Receipt this Period  12.50
Full Name (Last, First, Middle Initial) MR JOHN HOLLINGER Mailing Address 784 CAPE HENRY D  City COLUMBUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	R  State Zip Code OH 43228  C  Occupation DIR BUSINESS PLANNING  Aggregate Year-to-Date  390.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR BERNARD HUKILL Mailing Address 17219 CLOVIS  City HELOTES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code TX 78023  C  Occupation DIR PHARM OPS  Aggregate Year-to-Date  1950.00	Date of Receipt  M M M / D D / Y Y Y Y Y  0 9
SUBTOTAL of Receipts This Page (optional)		72.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	C. POLITICAL ACTION COMMITTEE (a.k	.a. Medco Health PAC)
MR RICHARD JONES  Mailing Address 12224 MONTCALM	I STREET	Date of Receipt    M M
City CARMEL	State Zip Code IN 46032	Transaction ID: INC.A.86943  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	
Full Name (Last, First, Middle Initial) MR DENNIS KACKLEY		Date of Receipt
Mailing Address 32 EAST RIVERGL	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
City WORTHINGTON	State Zip Code OH 43085	Transaction ID: INC.A.86866
FEC ID number of contributing federal political committee.	OH 43085	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUST SVC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MR BRICE LOVE		Date of Receipt
Mailing Address 2390 BRANDON R	D	0 9 0 4 2 0 1 0
City COLUMBUS	State Zip Code OH 43221	Transaction ID: INC.A.86793  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TRC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 487.50	
SUBTOTAL of Receipts This Page (optional	, n	50.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	) 	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 14 / 438   (check only one)		
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may	not be sold or used by any persoress 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 II	NC. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt		
Mailing Address 1066 WEST GRO	09 04 2010				
City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.86691  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/GM	1			
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1170.00			
Full Name (Last, First, Middle Initial) ROBERT MARK			Date of Receipt		
Mailing Address 1976 NE RIVER	M M / D D / Y Y Y Y O D O O O O O O O O O O O O O O				
City JENSEN BEACH	State FL	Zip Code 34957	Transaction ID: INC.A.87225  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	U-1007	50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP & CHI	EF SALES OFFICER			
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) MR EDWARD MCNEILEY			Date of Receipt		
	Mailing Address 2623 KENCHESTER LOOP				
City WESLEY CHAPEL	State FL	Zip Code 33543	Transaction ID: INC.A.86739  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	00040	12.50		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	RM PRACTICE			
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 487.50			
SUBTOTAL of Receipts This Page (optio	D		92.50		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>(X)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 15 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) PHILLIP MONACO			Date of Receipt
Mailing Address 835 NE STOKES	TERR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City JENSEN BEACH	State FL	Zip Code 34957	Transaction ID: INC.A.87228  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	04307	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n RMACY PRACTICES	
Receipt For:  Primary  General  Other (specify)	<del>- ' '</del>	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) KEVIN NESS			Date of Receipt
Mailing Address 3872 SW RAMSP	ECK ST		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PORT ST. LUCIE	State FL	Zip Code 34953	Transaction ID: INC.A.87224  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	04000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	DLUTIONS ARCHITECT	
Receipt For:  Primary General  Other (specify) ▼	· · · · · · · · · · · · · · · · ·	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MR BRYAN OLENIK			Date of Receipt
Mailing Address 653 E. DEVON DR	RIVE		M M / D D / Y Y Y Y Y O D O D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GILBERT	State AZ	Zip Code 85296	Transaction ID: INC.A.86960
FEC ID number of contributing federal political committee.	C	63290	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	RM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (option			62.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR JUN PARK	LANE		Date of Receipt
	Mailing Address 2843 HONEYSUCKLE  City	State	Zip Code	0 9 0 4 2 0 1 0 Transaction ID: INC.A.87072
	HILLIARD	OH	43026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio BUSINES	n SS PROCESS CHAMPION	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 487.50	
- В.	Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS Mailing Address 2780 FOLKSTONE RC	)AD		Date of Receipt
	walling Address 2760 FOLKSTONE NC	09 04 2010		
	City COLUMBUS	State OH	Zip Code	Transaction ID: INC.A.86649
	FEC ID number of contributing federal political committee.	C	43220	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 975.00	
– C.	Full Name (Last, First, Middle Initial) ARLENE PERAZELLA			Date of Receipt
	Mailing Address 600 NE BAYBERRY LA	ANE		09 04 2010
	City JENSEN BEACH	State FL	Zip Code	Transaction ID: INC.A.87222
	FEC ID number of contributing federal political committee.	C	34957	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM (	n OPERATIONS	
	Receipt For:  Primary General  Other (specify) ▼	_•	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			87.50
	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 1// 438   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
Mailing Address 800 SANDY TRAIL			09 04 2010
City	State	Zip Code	Transaction ID: INC.A.87047
KELLER	TX	76248	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 975.00	
Full Name (Last, First, Middle Initial) MRS JENNIFER ROBERTS			Date of Receipt
Mailing Address 1342 DALTON CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.86695
FAIRFIELD	OH	45014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		487.50	
Full Name (Last, First, Middle Initial) CHRISTOPHER RYAN			Date of Receipt
Mailing Address 7690 HUMMINGBIF	RD COURT		0 9 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87227
WEST PALM BEACH	FL	33412	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 FINA		
Receipt For:	Aggregate	Year-to-Date ▼	_
Primary General Other (specify) ▼		250.00	
			62.50

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate for each cate Detailed Sum	gory of the
	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and address of any politi	sed by any person for the purpose of soliciting contributions cal committee to solicit contributions from such committee.  MITTEE (a.k.a. Medco Health PAC)
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) HENRIK SANDELL Mailing Address 363 GRAPEVINE ROA  City WENHAM	State Zip Code	Date of Receipt  0 9 0 4 2 0 1 0  Transaction ID: INC.A.87226
	FEC ID number of contributing federal political committee.	MA 01984	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP MARKETING  Aggregate Year-to-Date	450.00
— В.	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III  Mailing Address 1767 FAIRMOUNT ST	REET	Date of Receipt  0 9 0 4 2 0 1 0
	City	State Zip Code	Transaction ID: INC.A.86843
	CARMEL FEC ID number of contributing federal political committee.	IN 46032	Amount of Each Receipt this Period  30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ONCOLOGY TRC (	DPS DPS
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼	1800.00
_ C.	Full Name (Last, First, Middle Initial) MR ERIC SMITHER  Mailing Address 1132 NORTH ST RT 1	23	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 LEBANON	State Zip Code OH 45036	Transaction ID: INC.A.86702
	FEC ID number of contributing federal political committee.	OH 45036	Amount of Each Receipt this Period  12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
Г			

ITEMIZED RI	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 19 / 438   (check only one)     X   11a
Any information cop or for commercial po	ed from such Reports and Surposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COM MEDCO HEAD	, ,	POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, MS JENNIFER SI	First, Middle Initial) PIDLE			Date of Receipt
Mailing Address	6108 HUNTER 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.86869
COLLEYVILLI FEC ID number federal political c	of contributing	C	76034	Amount of Each Receipt this Period  25.00
Name of Employ MEDCO HEALT	er H SOLUTIONS	Occupatio VP/GM	n	
Receipt For: Primary Other (spe	General		e Year-to-Date ▼ 975.00	
Full Name (Last, MR TIMOTHY SV	First, Middle Initial)			Date of Receipt
	8362 GOLDEN PRAIF	RIE DRIVE		M M / D D / Y Y Y Y O D O O O O O O O O O O O O O O
City		State FL	Zip Code	Transaction ID: INC.A.86722
TAMPA FEC ID number federal political c		C	33647	Amount of Each Receipt this Period  25.00
Name of Employ MEDCO HEALT	er H SOLUTIONS	Occupatio VP/GM	n	
Receipt For: Primary Other (spe	General	- t	e Year-to-Date ▼ 1775.00	
Full Name (Last,	First, Middle Initial)			Date of Receipt
Mailing Address	10302 S FEDERAL H	WY		M M / D D / Y Y Y Y Y O D O D O D O D O D O D O D O
City PORT ST LUC		State FL	Zip Code 34952	Transaction ID: INC.A.86830  Amount of Each Receipt this Period
FEC ID number federal political c	of contributing	C	0+00E	50.00
Name of Employ MEDCO HEALT	er H SOLUTIONS	Occupatio VP/GM F	n PATIENT SVCS	
Receipt For: Primary Other (spe	General   General	+ +	Year-to-Date ▼ 500.00	
SUBTOTAL of Re	ceipts This Page (optional) .	1		100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Mailing Address 5 APPLE ORCHAF	RD RD		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City MOORESTOWN FEC ID number of contributing	State NJ	Zip Code 08057	Transaction ID: INC.A.86855  Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation VP/GM Aggregate	n e Year-to-Date ▼	50.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI  Mailing Address 6691 DEERVIEW	DRIVE	1950.00	Date of Receipt
City LOVELAND FEC ID number of contributing federal political committee.	State OH	Zip Code 45140	Transaction ID: INC.A.86763  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation VP/GM Aggregate	Year-to-Date ▼ 975.00	
Full Name (Last, First, Middle Initial) CHARLES M. LILLIS Mailing Address 13 CASTLE PINES	S DRIVE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Castle Rock	State CO	Zip Code 80108	Transaction ID: INC.A.86517  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5000.00
Name of Employer MEDCO HEALTH SOLUTIONS	<u>'</u>	MEMBER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (option	al)		5075.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	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) DONA K. CROTTS			Date of Receipt
	Mailing Address 15614 E. CHOLLA DR.  City	State	Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FOUNTAIN HILLS	AZ	85268-4313	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1300.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXECUT	n TIVE DIRECTOR, BUSINESS	FREQUIREME
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
- В.	Full Name (Last, First, Middle Initial) KEITH VAUGHAN			Date of Receipt
	Mailing Address 59 DEGRAY TERRACE	Ē		09 09 2010
	City	State	Zip Code	Transaction ID: INC.A.86516
	MAHWAH	NJ	07430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SENIOR	<sup>on</sup> : DIRECTOR, RETAIL PHARI	MACY AUDIT
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary ☐ General Other (specify) ▼		300.00	
- C.	Full Name (Last, First, Middle Initial) MR THOMAS ABSON			Date of Receipt
	Mailing Address 57 SYCAMORE DRIVE			0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86704
	WALDWICK	NJ	07463	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	-	RMULARY & COVERAGE MO	GNT
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date  500.00	
	SUBTOTAL of Receipts This Page (optional)			1425.00
	TOTAL This Period (last page this line number of		·	

# SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 438 (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 mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MS LESLIE ACHTER			Date of Receipt
	Mailing Address 821 ALBEMARLE STF	REET		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86690
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ANAI	n _YTICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
_	Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK			Date of Receipt
	Mailing Address 1021 SUNSET RIDGE			09 / 11 / 2010
	City	State	Zip Code	Transaction ID: INC.A.86595
	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		RM CONTRACT & CONSUL	TING
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		1000.00	
. –	Full Name (Last, First, Middle Initial) DIANE ADAMS	<u> </u>		Date of Receipt
	Mailing Address 34 THOMAS ST.			0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87086
	CALDWELL	NJ	07006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		BUSINESS REQUIREMENT	s
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	fo	se separate schedule(s) or each category of the etailed Summary Page	FOR LINE NUMBER:   PAGE 23 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not g the name and address	be sold or used by any perso of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL ACTI	ON COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR STEPHEN ADLER  Mailing Address 139 BELLVALE LA	VEC DD		Date of Receipt
City		Zip Code	09 11 2010
WARWICK		210 Code 10990	Transaction ID: INC.A.86688  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 TEC	CHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year	r-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MS KELLY AGNEW			Date of Receipt
Mailing Address 1360 N. SANDBU #1602	RG TERRACE		09 / 11 / 2010
City CHICAGO		Zip Code 60610	Transaction ID: INC.A.86608  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT	EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year	r-to-Date ▼ 500.00	]
Full Name (Last, First, Middle Initial) MS MICHELE AGNEW			Date of Receipt
Mailing Address 2433 ANDERSON	PARK DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HENDERSON		Zip Code 89044	Transaction ID: INC.A.86582  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year	r-to-Date ▼ 487.50	
SUBTOTAL of Receipts This Page (option	al)		87.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JANET ALEXANDER  Mailing Address 32 WEST 83RD STR APT #2  City  NEW YORK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State NY C Occupation NATL AC	CCT EXEC	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify)  Full Name (Last, First, Middle Initial)	Aggregate	e Year-to-Date ▼ 500.00	
MR JEFFREY ALEXANDER  Mailing Address 4 DEERPOND CT  City  FLEMINGTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		Zip Code 08822  n TECHNOLOGY 2 Year-to-Date ▼ 300.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.86715  Amount of Each Receipt this Period  15.00
Full Name (Last, First, Middle Initial) DR JODY ALLEN Mailing Address 3031 MOUNT HILL E  City MIDLOTHIAN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State VA  C  Occupation VP CLIN	Zip Code 23113  n ICAL POLICY-GOV AFFAIRS e Year-to-Date ▼ 1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.86687  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and add	lress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO Mailing Address 19 ROSS ROAD			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 SCARSDALE FEC ID number of contributing	State NY	Zip Code 10583	Transaction ID: INC.A.86774  Amount of Each Receipt this Period  50.00
Receipt For:  Primary  Other (specify) ▼	Occupation VP INFO	TECHNOLOGY Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) DUNSTON ALMEIDA  Mailing Address 225 5TH AVENUE 10R  City NEW YORK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		Zip Code 10010  NTERNATL BUSINESS DEV	Date of Receipt    M M M   D D D   2 0 1 0
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) TEJWANSH ANAND Mailing Address 10 WHIPPOORWIL		225.00	Date of Receipt  0 9 1 1 2 0 1 0
City CHAPPAQUA FEC ID number of contributing federal political committee.	State NY	Zip Code 10514	Transaction ID: INC.A.87043  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>- ' '</del>	TECHNOLOGY Year-to-Date ▼ 1000.00	]
SUBTOTAL of Receipts This Page (optional	)		125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>.)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MRS LAUREN ANTONELLI  Mailing Address 64 CUPSAW DRIVE	<b>.</b>		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  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07456	Transaction ID: INC.A.86798  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR PRC	DDUCT MGMT  Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  MS JAYME ANTONOPLOS  Mailing Address 48 WITTE ROAD			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HEWITT FEC ID number of contributing	State NJ	Zip Code 07421	Transaction ID: INC.A.86875  Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR EXE	C CORR	25.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI Mailing Address 20 CHADWELL PLA	ACE		Date of Receipt  0 9 1 1 2 0 1 0
City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.86803  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07900	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CC		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional			75.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separat for each cate Detailed Sur		FOR LINE NUMBER: PAGE 27 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS I	ng the name and address of any pol	itical committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  DENNIS AUCH  Mailing Address 1981 E. COVEY	/IEW COURT		Date of Receipt  0 9 1 1 2 0 1 0
City SALT LAKE CITY FEC ID number of contributing federal political committee.	State Zip Code UT 84106		Transaction ID: INC.A.87194  Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼	Occupation VP REIMBURSEMEN Aggregate Year-to-Date	<u>_</u>	
Full Name (Last, First, Middle Initial) WILLIAM AX Mailing Address 1607 STODDARI	) ST		Date of Receipt  Date of Receipt  D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ROCKFORD  FEC ID number of contributing federal political committee.	State Zip Code IL 61108		Transaction ID: INC.A.87205  Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  Other (specify) ▼	Occupation AVP SALES-HEMOPH Aggregate Year-to-Date		
Full Name (Last, First, Middle Initial) MS CHARLOTTE BABCOCK Mailing Address 2636 SHAKER R	)		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  CLEVELAND HEIGHTS  FEC ID number of contributing federal political committee.	State Zip Code OH 44118		Transaction ID: INC.A.87169  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation NATL ACCT EXEC Aggregate Year-to-Date	500.00	
SUBTOTAL of Receipts This Page (option	nal)	<b>&gt;</b>	100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ERIK BAGIN Mailing Address 73 HIGHLAND AVE  City GLEN RIDGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State NJ C Occupation VP/GM	Zip Code 07028	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87085  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  MS BECKIE BARATKO  Mailing Address 80 N. WOODLAND  City  ENGLEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State NJ C Occupation VP PROI	Zip Code 07631	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR THOMAS BARATTA Mailing Address 69 SKYLINE DR  City UPPER SADDLE RIVER FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07458 n TECHNOLOGY Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line numb	<u> </u>	•	150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	tatements may not be sold or used by any personame and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS BARDZELL  Mailing Address 77 HIGHLAND AVE  City MIDLAND PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07432  C  Occupation TECHNICAL SPECIALIST  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 1 2 0 1 0  Transaction ID: INC.A.87018  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  MS ROBYN BARILLARI  Mailing Address 3 DELANEY COURT  City  BRIDGEWATER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code NJ 08807  C  Occupation DIR MEDICARE OPS  Aggregate Year-to-Date   600.00	Date of Receipt  M M Z 2010  Transaction ID: INC.A.87091  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) JANE BARLOW Mailing Address 3 AVALON COURT  City HOPEWELL JUNCTION  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 12533  C  Occupation VP MEDICAL POLICIES  Aggregate Year-to-Date   1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		105.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 438 (check only one)    X
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personante name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL BARONE Mailing Address 452 MEDWAY ROA  City	D State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
HIGHLAND HEIGHTS  FEC ID number of contributing federal political committee.	OH 44143	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SVP & GENERAL MGR  Aggregate Year-to-Date   3840.00	
Full Name (Last, First, Middle Initial) MR DAVID BAUGH Mailing Address 1813 ADONIS AVE		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: INC.A.87026
HENDERSON FEC ID number of contributing federal political committee.	NV 89074	Amount of Each Receipt this Period  58.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation MGR BENEFIT DELIVERY SYSTEM Aggregate Year-to-Date ▼	8
Other (specify)	1160.00	
Full Name (Last, First, Middle Initial)  JAMES BECKER  Mailing Address 35 BIRCH STREET		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: INC.A.87034
EMERSON FEC ID number of contributing federal political committee.	NJ 07630	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ENTERPRISE BUSINESS INTEL	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	•	275.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	γ not be sold or used by any persodress of any political committee to	
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
<u>-</u>	Full Name (Last, First, Middle Initial) MR DONALD BELFER			Date of Receipt
	Mailing Address 1270A VALLEY ROAD City	State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.87123
	WAYNE	NJ	07470	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BUSINESS ANALYSIS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
	Full Name (Last, First, Middle Initial) MR STEPHEN BELL			Date of Receipt
	Mailing Address 24 GLENWOOD ROA	ND .		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87046
	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 FINA	NCE	
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		1000.00	
	Full Name (Last, First, Middle Initial) MS THERESA BENSHOOF			Date of Receipt
	Mailing Address 1332 SE 78TH ST			0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86734
	RUNNELLS	IA	50237	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  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 32 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS MARYBETH BERENGUER			Date of Receipt
Mailing Address 2 WEXLER CT			0 9 1 1 2 0 1 0
City GARNERVILLE	State NY	Zip Code 10923	Transaction ID: INC.A.86902  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10920	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL PRODUCT MGMT	
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MS CARMEN BERG			Date of Receipt
Mailing Address P O BOX 1373			0 9 1 1 2 0 1 0
City MEDICAL LAKE	State WA	Zip Code 99022	Transaction ID: INC.A.86953
FEC ID number of contributing federal political committee.	C	99022	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n .RM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) JEAN BERGWALL			Date of Receipt
Mailing Address 2546 HOLLYHOCK	COVE		M M / D D / Y Y Y Y Y O D D / 2010
City GERMANTOWN	State TN	Zip Code 38138	Transaction ID: INC.A.87219  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30130	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRC	n DDUCT LINE II	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	.l)		62.50

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Page	e (Crieck Only Orle)
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by arg the name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.  (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MS STACEY BERNSTEIN  Mailing Address 166 BERKELEY P	LACE	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  GLEN ROCK  FEC ID number of contributing	State Zip Code NJ 07452	Transaction ID: INC.A.87102  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  Other (specify)   General	Occupation ASST COUNSEL  Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR DAVID BERRY Mailing Address 11 COBBLESTON	IE LANE	Date of Receipt  0 9 1 1 2 0 1 0
City RAMSEY  FEC ID number of contributing federal political committee.	State Zip Code NJ 07446	Transaction ID: INC.A.86883  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR TECHNOLOGY  Aggregate Year-to-Date ▼  500.	00
Full Name (Last, First, Middle Initial) INDERPAL BHANDARI Mailing Address 220 ARDSLEY RO	DAD	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SCARSDALE  FEC ID number of contributing federal political committee.	State Zip Code NY 10583	Transaction ID: INC.A.87111  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	00
SUBTOTAL of Receipts This Page (option	nal)	100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 438 (check only one)    X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS EILEEN BIDELL	C. POLITICAL ACTION COMMITTEE (a.k.a	Date of Receipt
Mailing Address 71 WASHINGTON  City	State Zip Code	0 9 1 1 1 2 0 1 0 Transaction ID: INC.A.86879
TOWACO FEC ID number of contributing federal political committee.	NJ 07082	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR PHARM OPS  Aggregate Year-to-Date ▼  500.00	1
Full Name (Last, First, Middle Initial) MR ANDREW BIDINOTTO Mailing Address 7728 GRACE DRIV	E	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.86618
NORTH RICHLAND HIL  FEC ID number of contributing federal political committee.	TX 76182	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINESS PROCESS CHAMPION	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS		Date of Receipt
Mailing Address 4273 BROGDAN FA	ARM COURT	09 11 2010
City BUFORD	State Zip Code GA 30518	Transaction ID: INC.A.86894  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optiona	) )	62.50

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
NA	ME OF COMMITTEE (In Full)			n for the purpose of soliciting contributions solicit contributions from such committee.
A. CA Ma	EDCO HEALTH SOLUTIONS INC.  II Name (Last, First, Middle Initial) LIVIN BINGHAM  iiling Address 13702 W. 48TH ST.  y  HAWNEE  C ID number of contributing leral political committee.  me of Employer CCREDO HEALTH GROUP  ceipt For:  Primary General  Other (specify)   General	State KS C Occupatio DIR CLIN	Zip Code 66216	Date of Receipt  O 9
B. MS  Ma  Cit  MO  FE  fec  Na  MB	Il Name (Last, First, Middle Initial) S CHRISTINE BIZARRO iiling Address 26 DAYLILY DRIVE  Y OUNT LAUREL C ID number of contributing leral political committee.  me of Employer EDCO HEALTH SOLUTIONS ceipt For: Primary General Other (specify)   Other (specify)	State NJ  C  Occupatio VP HR  Aggregate	Zip Code 08054 n e Year-to-Date ▼ 625.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1
C. MS Ma	Il Name (Last, First, Middle Initial) S SUZANNE BLACKBURN  illing Address 4520 LINWOOD LAN  Y  EEPHAVEN  C ID number of contributing leral political committee.  me of Employer EDCO HEALTH SOLUTIONS  ceipt For:  Primary General  Other (specify)	State MN  C  Occupatio SVP CLI	Zip Code 55331  n ENT & MKT STRATEGIC DE e Year-to-Date ▼ 1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87025  Amount of Each Receipt this Period  50.00
SUB	<b>FOTAL</b> of Receipts This Page (optional) .		<b>)</b>	100.00

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for c	ormation copied from such Reports and Sommercial purposes, other than using the ME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	DCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
<b>A.</b> MS.	Name (Last, First, Middle Initial) JESSICA BLANTON ing Address 410 CORNELIA ST. #-	4		Date of Receipt
	ing Address 410 CORNELIA 51. #	+		09 11 2010
City		State	Zip Code	Transaction ID: INC.A.86736
	ONTON	NJ	07005	Amount of Each Receipt this Period
	CID number of contributing eral political committee.	C		25.00
	ne of Employer DCO HEALTH SOLUTIONS	Occupation DIR PRO	n DPOSAL DEPARTMENT	
Rec	eipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
<b>B.</b> MR	Name (Last, First, Middle Initial) JONATHAN BLAUMAN			Date of Receipt
	ing Address 50 NEW ENGLAND D	R 		09 11 7 2010
City		State	Zip Code	Transaction ID: INC.A.86838
FEC	MSEY CID number of contributing eral political committee.	C	07446	Amount of Each Receipt this Period  50.00
Nam MEI	ne of Employer DCO HEALTH SOLUTIONS	Occupation VP MKT	n ING & PRODUCT DEV	
Rec	eipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	Name (Last, First, Middle Initial) IES BLONDIN			Date of Receipt
Mail ——	ing Address 115 AUBURN MEADC	WS DR		09 / 11 / 2010
City		State MO	Zip Code	Transaction ID: INC.A.87203
FEC	RISTELL  CID number of contributing eral political committee.	C	63348	Amount of Each Receipt this Period  25.00
Nam AC	ne of Employer CREDO HEALTH GROUP	Occupation GENERA	on AL MGR - MULTI BRANCH	
Rec	eipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
SUBT	OTAL of Receipts This Page (optional)			100.00
	L This Period (last page this line number		<u> </u>	

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for comme	on copied from such Reports and Strcial purposes, other than using the COMMITTEE (In Full)  HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name	e (Last, First, Middle Initial) EN BLOOM	OLITIOAL /	AOTION OOMMITTEE (a.n.a	Date of Receipt
	ddress 17818 ARBOR GREEN			09 / 11 / 2010
City TAMPA		State FL	Zip Code 33647	Transaction ID: INC.A.86837  Amount of Each Receipt this Period
FEC ID nu	umber of contributing litical committee.	C		50.00
Name of E MEDCO I	Employer HEALTH SOLUTIONS	Occupatio VP FIEL		
Receipt Form		Aggregate	e Year-to-Date ▼ 1000.00	
. KEN BODI	e (Last, First, Middle Initial) MER ddress P.O. BOX 381947			Date of Receipt
ivialing Ac	Juless P.O. BOX 381947			09 / 11 / 2010
City GERMA	NITOWN	State TN	Zip Code 38183	Transaction ID: INC.A.86927
FEC ID no	umber of contributing litical committee.	C	30103	Amount of Each Receipt this Period
Name of E ACCRED	Employer O HEALTH GROUP	Occupatio COO - A	n CCREDO HEALTH GROUP	
Receipt Fo		Aggregate	e Year-to-Date ▼ 3840.00	
MR MICHA	e (Last, First, Middle Initial) AEL BOGDA ddress 80 LEONA CT			Date of Receipt
City		State	Zip Code	0 9 1 1 2 0 1 0  Transaction ID: INC.A.87028
<u>LEVITT(</u>	NWC	NY	11756	Amount of Each Receipt this Period
	umber of contributing litical committee.	C		25.00
Name of E MEDCO I	Employer HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
Receipt For Prim Other		Aggregate	e Year-to-Date ▼ 500.00	
	of Receipts This Page (optional)	<u> </u>		267.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MRS HEATHER BONOME			Date of Receipt
	Mailing Address 203 12TH STREET N  City	 State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.86776
	WASHINGTON	DC	20002	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 CLIN	n NICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA Mailing Address 109 ARBOR PL			Date of Receipt
	Maining Additional Top ATTBOTT E			09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86657
	BRYN MAWR	PA	19010	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 SALE		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- C.	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX			Date of Receipt
<b>.</b>	Mailing Address 6527 SHORBURGH [	DRIVE		0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86563
	INDIANAPOLIS	IN	46278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>_ '</del>	ARM PRACTICE	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		975.00	
	SUBTOTAL of Receipts This Page (optional) .			75.00
ļ	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 438 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) RUSS BOURNE Mailing Address 242 N HIGHLAND City	State	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
MEMPHIS  FEC ID number of contributing federal political committee.	TN	38111	Transaction ID: INC.A.87216  Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼	Occupation VP BUS Aggregate		
Full Name (Last, First, Middle Initial)  MS SALLIE BOWDEN  Mailing Address 5259 FISHERCRES	ST LN		Date of Receipt  0 9 1 1 2 0 1 0
City RICHMOND	State VA	Zip Code 23231	Transaction ID: INC.A.86975  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FORI	n MULARY CONSULTING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 4000.00	]
Full Name (Last, First, Middle Initial) KAREN BOWE	I		Date of Receipt
Mailing Address 177 N. MILL ROAD			09 / 11 / Y Y Y Y Y
City HARRISBURG	State PA	Zip Code 17112	Transaction ID: INC.A.87177  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR NAT	n 'L CUST RELATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional			250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN Mailing Address 15 DAWN LANE  City RINGWOOD  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07456	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
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼		on IR STRAT PRODUCT MGM e Year-to-Date ▼ 1000.00	
Б.	Full Name (Last, First, Middle Initial) MR CHRISTOPHER BRADBURY Mailing Address 3 DEER HORN TRAIL			Date of Receipt  0 9 1 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86661
	UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer MEDCO HEALTH SOLUTIONS		E ENHANCING SOLUTIONS	S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
С. С.	Full Name (Last, First, Middle Initial) MR KEITH BRADBURY			Date of Receipt
	Mailing Address 122 DERFUSS LN			09 / 11 / Y Y Y Y Y Y Y
	City BLAUVELT	State NY	Zip Code 10913	Transaction ID: INC.A.86627
	FEC ID number of contributing federal political committee.	C	10913	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR DRUG INFO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 475.00	
	SUBTOTAL of Receipts This Page (optional)			90.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS PATRICIA BRANUM			Date of Receipt
	Mailing Address 210 FROG HOLLOW	ROAD		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86954
	COATESVILLE	PA	19320	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFC	n ) & PROCESS ENGINEERIN	IG
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1700.00	
– В.	Full Name (Last, First, Middle Initial) MR JOHN BRENNAN	1		Date of Receipt
	Mailing Address 2 CARMEN LANE			09 11 7 2010
	City	State	Zip Code	Transaction ID: INC.A.87071
	FLEMINGTON	NJ	08822	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP AUD	IT	
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		1000.00	
c. -	Full Name (Last, First, Middle Initial) MR JAMES BREWER, III	•		Date of Receipt
	Mailing Address 1888 BROADHAVEN	DR		0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86800
	MIDDLEBURG	FL	32068	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>, '</del>	L ACCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	SUBTOTAL of Receipts This Page (optional)			185.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 42 / 438   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS LINDA BRIDGE			Date of Receipt
Mailing Address 136 BEECH ST			0 9 1 1 2 0 1 0
City BELLEVILLE	State NJ	Zip Code	Transaction ID: INC.A.86751
FEC ID number of contributing federal political committee.	C	07109	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLIE	n ENT/MEMBER COMM	
Receipt For:  Primary  General  Other (specify) ▼	<del>'</del>	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR PAUL BRISSON			Date of Receipt
Mailing Address 469 MANOR LANE			0 9 1 1 1 2 0 1 0
City PELHAM MANOR	State NY	Zip Code 10803	Transaction ID: INC.A.86741  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRO	n DDUCT DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR RICHARD BROOKLER			Date of Receipt
Mailing Address 9 ROMARY COURT	Γ		09 11 2010
City GLEN ROCK	State NJ	Zip Code 07452	Transaction ID: INC.A.86620
FEC ID number of contributing federal political committee.	C	0/432	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l)		75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 43 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GREGORY BROWN			Date of Receipt
Mailing Address 1162 PLAINS ROA	AD		09 11 2010
City WALLKILL	State NY	Zip Code 12589	Transaction ID: INC.A.86576  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	ACCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR KENNETH BROWN	I		Date of Receipt
Mailing Address 540 GIORDANO D	RIVE		0 9 1 1 1 2 0 1 0
City YORKTOWN HEIGHTS	State NY	Zip Code 10598	Transaction ID: INC.A.86654  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 FNTF	n ERPRISE BUS INTELLIGEN	—  C⊭
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) STEVEN BROWN	<u> </u>		Date of Receipt
Mailing Address 140 S GROVE PA	RK		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38117	Transaction ID: INC.A.87197
FEC ID number of contributing federal political committee.	C	30117	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRC	DUCT LINE II	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS VIVIAN BULGER  Mailing Address 120 EAST MAIN ST  City WASHINGTONVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10992  C  Occupation SR DIR FINANCE  Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y  O 9 11 1 2 0 1 0  Transaction ID: INC.A.86926  Amount of Each Receipt this Period  20.00
Full Name (Last, First, Middle Initial) AMANDA BUNDY Mailing Address 5812 SEVEN POINT  City HERMITAGE FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:	S TRACE  State Zip Code TN 37076  C  Occupation VP REIMBURSEMENT  Aggregate 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
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) GEORGE BURNITE Mailing Address 68 WOODLAND DRI  City CHURCHVILLE  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP	State Zip Code PA 18966  C  Occupation DIR SALES PLANNING	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 500.00	95.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 45 / 438   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MR KEVIN BURON			Date of Receipt
Mailing Address 25 TIMBERLAND			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.86810
ALISO VIEJO	CA	92656	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) KAREN CALANDRO			Date of Receipt
Mailing Address 306 FOREST LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State IL	Zip Code	Transaction ID: INC.A.87157
SCHAUMBURG  FEC ID number of contributing federal political committee.	C	60139	Amount of Each Receipt this Period  10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio REG DIF	n R ACCT MGMT	7
Receipt For:	Aggregate	e Year-to-Date 🔻	
Primary General Other (specify) ▼		440.00	
Full Name (Last, First, Middle Initial) MRS DOREEN CALDER			Date of Receipt
Mailing Address 441 S ELM STREET			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.86560
MAYWOOD	NJ	07607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer MEDCO HEALTH SOLUTIONS	<del>- ' '</del>	DUCT DEVELOPMENT	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
Other (specify)		800.00	
SUBTOTAL of Receipts This Page (optional)	1		100.00
TOTAL This Period (last page this line number		•	

SCHEDULE ITEMIZED F	A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial  NAME OF CO	purposes, other than using the MMITTEE (In Full)	name and add	y not be sold or used by any person dress of any political committee to ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions o solicit contributions from such committee.
MR FRANK CAI Mailing Addres  City  NEW MILFO	s 146 SEMINOLE AVE	State NJ	Zip Code 07646	Date of Receipt    M M
Name of Emplo MEDCO HEAL Receipt For: Primary Other (sp	over TH SOLUTIONS  ☐ General Decify) ▼	Occupation DIR FINA Aggregate		
MR GABRIÈL C	t, First, Middle Initial) APPUCCI s 119 WASHINGTON AV	/ENUE		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.86907
CHATHAM FEC ID numbe federal political	r of contributing committee.	C	07928	Amount of Each Receipt this Period
Name of Emplo MEDCO HEAL	oyer TH SOLUTIONS	Occupation	n ONTROLLER	
Receipt For: Primary Other (sp	General pecify) ▼		Year-to-Date ▼ 3846.20	]
Full Name (Las MR VICENTE C Mailing Addres				Date of Receipt
City	APT 3N	State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.86955
NEW YORK		NY	10001	Amount of Each Receipt this Period
FEC ID numbe federal political	r of contributing committee.	C		12.50
Name of Emplo MEDCO HEAL	oyer TH SOLUTIONS	Occupation VP USER	n R EXPERIENCE	7
Receipt For: Primary Other (sp	General pecify) ▼		e Year-to-Date ▼ 250.00	
SUBTOTAL of R	eceipts This Page (optional)			229.81

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 4//438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS BARBARA CARIGAN			Date of Receipt
Mailing Address 5589 W. TECO AV	E.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State NV	Zip Code	Transaction ID: INC.A.87090
LAS VEGAS  FEC ID number of contributing federal political committee.	C	89118	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 975.00	
Full Name (Last, First, Middle Initial) MR MARK CARLSON			Date of Receipt
Mailing Address 66 BIRDSONG PAI	RKWAY		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ORCHARD PARK	State NY	Zip Code	Transaction ID: INC.A.86861
FEC ID number of contributing federal political committee.	C	14127	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n HLTH CARE OPS	
Receipt For:  Primary General  Other (specify) ▼	- <del></del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR RAYMOND CARLUCCI			Date of Receipt
Mailing Address 24 SHERI DRIVE			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ALLENDALE	State NJ	Zip Code 07401	Transaction ID: INC.A.86922  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07401	52.50
Name of Employer ACCREDO HEALTH GROUP	Occupation GROUP	n VP MARKET STRATEGY &	DEV
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	
SUBTOTAL of Receipts This Page (optional	J)		102.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 48 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) JOSEPH CASACCIA JR			Date of Receipt
Mailing Address 9788 LIPSEY CV			0 9 1 1 2 0 1 0
City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.86882  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRC	n DFESSIONAL PRACTICES	
Receipt For:  Primary General  Other (specify) ▼	<del>-                                    </del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS CATHERINE CASALE			Date of Receipt
Mailing Address 16345 HEATHROW	V DRIVE		0 9 1 1 2 0 1 0
City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.86985  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33047	13.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	e Year-to-Date ▼ 273.00	
Full Name (Last, First, Middle Initial) MR BARRY CESANEK			Date of Receipt
Mailing Address 5 LEXINGTON CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SHAMONG	State NJ	Zip Code 08088	Transaction ID: INC.A.86820  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00000	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROI		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optional			50.50

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR MARVEN CHIN	20		Date of Receipt
	Mailing Address 1604 SNOWBERRY I	JK.		09 11 7 2010
	City	State	Zip Code	Transaction ID: INC.A.87079
	WILLIAMSTOWN FEC ID number of contributing federal political committee.	C	08094	Amount of Each Receipt this Period  12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR QUA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
В.	Full Name (Last, First, Middle Initial) HWEI-CHUNG CHOU			Date of Receipt
	Mailing Address 36 TANGLEWOOD H	0 9 1 1 2 0 1 0		
	City	State	Zip Code	Transaction ID: INC.A.87140
	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 DIR TEC	on CHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		500.00	
C.	Full Name (Last, First, Middle Initial) MR RAYMOND CHUNG			Date of Receipt
	Mailing Address 186 CROWN POINT	RD.		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87083
	PARSIPPANY  FEC ID number of contributing federal political committee.	NJ C	07054	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HLT	on TH MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .			62.50
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any peg the name and address of any political committee	
MEDCO HEALTH SOLUTIONS IN	C. POLITICAL ACTION COMMITTEE (a.I	k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MRS MARLENE CLEMENT  Mailing Address 42 MESQUITE VIL	LAGE CIR	Date of Receipt
City	State Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.86773
HENDERSON	NV 89012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUST SVC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MR DANIEL COLE		Date of Receipt
Mailing Address 2901 HIDDEN HIL	09 / 11 / 2010	
City	State Zip Code	Transaction ID: INC.A.87183
CORONA	CA 92882	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation GENERAL MGR - MULTI BRANCH	1
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	460.00	
Full Name (Last, First, Middle Initial) MR JASON COLE	1	Date of Receipt
Mailing Address 14917 E BELLA V	STA	09 / 11 / 2010
City <u>VERADALE</u>	State Zip Code WA 99037	Transaction ID: INC.A.86789  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	
CURTOTAL ACROSSISS TO S. C. S.	al)	62.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P			
Full Name (Last, First, Middle Initial) MS SUSAN COLUCCI		\(\frac{\partial}{2}\)	Date of Receipt
Mailing Address 703 SUCCASUNNA RI	D.		09 11 2010
City	State	Zip Code	Transaction ID: INC.A.87096
LANDING	NJ	07850	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 HLT		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE			Date of Receipt
Mailing Address 130 WEST 67TH STRE	EET, #4J		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.87059
NEW YORK	NY	10023	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 FECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR ROBERT COOK			Date of Receipt
Mailing Address 270 S FRANKLIN TUR	NPIKE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.86639
RAMSEY	NJ	07446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n HLTH CARE OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			75.00

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

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
,	ny information copied from such Reports and r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial)  JEFFREY COOLE  Mailing Address 155 ASTON HALL DF			Date of Receipt
	Maining Address 195 ASTON HALL DE	NIV⊑		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87189
	EADS	TN	38028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio VP TAX	n AND REGULATORY REPOR	— रा
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼		1000.00	
. –	Full Name (Last, First, Middle Initial) ANTONIO CORREIA			Date of Receipt
	Mailing Address 19 WILLIAMS LANE			0 9 1 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87114
	CHAPPAQUA	NY	10514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BUSI	n NESS DEV	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1000.00	
. –	Full Name (Last, First, Middle Initial) MRS BARBARA COSGRIFF			Date of Receipt
	Mailing Address 2045 MAYFAIR MCLI	EAN COURT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City FALLS CHURCH	State VA	Zip Code 22043	Transaction ID: INC.A.87155  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	ELOTO	195.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP PUI	n BLIC POL&EXTRNL AFFAIR	es es
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	3900.00	
Г				295.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of the name and add	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR STEPHEN COURTMAN  Mailing Address 25 FAIRWAY TRA	NL NL	Date of Receipt  0 9 1 1 2 0 1 0
City SPARTA  FEC ID number of contributing federal political committee.	State Zip Code NJ 07871	Transaction ID: INC.A.86775  Amount of Each Receipt this Period  192.31
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SVP PHARMACY NETWORK MGM Aggregate Year-to-Date   3846.20	nt
Full Name (Last, First, Middle Initial) MR HART COVEN Mailing Address 28 OAK LANE		Date of Receipt  0 9 1 1 2 0 1 0
City  MORRISTOWN  FEC ID number of contributing federal political committee.	State Zip Code NJ 07960	Transaction ID: INC.A.86892  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation VP BIAC  Aggregate Year-to-Date ▼  1000.00	
Other (specify) ▼  Full Name (Last, First, Middle Initial)  JONATHAN COX  Mailing Address 9638 DOVE SPRIM		Date of Receipt
City  GERMANTOWN	State Zip Code TN 38139	0 9 1 1 2 0 1 0  Transaction ID: INC.A.87152  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP Receipt For:	Occupation VP BUS DEV  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option	al)	267.31

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 438 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any per ng the name and address of any political committee	son for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS II	NC. POLITICAL ACTION COMMITTEE (a.k	.a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MR ROBERT CRAIG  Mailing Address 7979 E SANTA C	ATALINA DR	Date of Receipt
City	State Zip Code	0 9 1 1 2 0 1 0  Transaction ID: INC.A.86756
SCOTTSDALE  FEC ID number of contributing federal political committee.	AZ 85255	Amount of Each Receipt this Period  60.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR PRODUCT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) MR PETER CSUTOROS		Date of Receipt
Mailing Address 16 PLEASANT AV	0 9 1 1 2 0 1 0	
City	State Zip Code	Transaction ID: INC.A.87051
LINCOLN PARK  FEC ID number of contributing federal political committee.	NJ 07035	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR DAVID CUNNOLD	-	Date of Receipt
Mailing Address 5005 JONQUILLA	0 9 1 1 2 0 1 0	
City	State Zip Code	Transaction ID: INC.A.87110
ALPHARETTA  FEC ID number of contributing federal political committee.	GA 30004	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUPTOTAL of Descipts This Dega (ention	nal)	110.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ANGELO CUOZZO Mailing Address 19 IDA COURT  City STATEN ISLAND FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		Zip Code 10312  n SHNOLOGY e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) JANET DAGLEY  Mailing Address 721 BROWNLEE DF	RIVE	500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  NASHVILLE  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  Other (specify) ▼		Zip Code 37205 n RKETING e Year-to-Date ▼	Transaction ID: INC.A.87218  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR AJAY DALAL Mailing Address 4603 NEWCASTLE I  City FRISCO FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State TX  C Occupatio DIR CLIN	Zip Code 75034  n NICAL SVCS e Year-to-Date  450.00	Date of Receipt  M M M / D D / Y Y Y Y Y  0 9 1 1 1 2 0 1 0  Transaction ID: INC.A.87105  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)			75.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
or for commercial purposes, other than using	nd Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JOHN DALY		Date of Receipt
Mailing Address 46 BLUEBELL CT  City	State Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PARAMUS	NJ 07652	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS ROSELIN DANIEL		Date of Receipt
Mailing Address 17 DEVONSHIRE I	09 11 2010	
City	State Zip Code	Transaction ID: INC.A.86901
RANDOLPH	NJ 07869	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS	-	Date of Receipt
Mailing Address 4156 DUNMORE D	PRIVE	09 11 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.86877
LAKE WALES	FL 33859	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	
SUBTOTAL of Receipts This Page (optional	al)	75.00
	iber only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person of the name and address of any political committee to sold.  NC. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS MARY DASCHNER  Mailing Address 2926 EWING AVE	E S	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MINNEAPOLIS FEC ID number of contributing	State Zip Code MN 55416	Transaction ID: INC.A.86733  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	Occupation GROUP PRES RETIREE SOLUTIONS Aggregate Year-to-Date	192.30
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	3846.00	
MR ANDREW DAVIS  Mailing Address 5616 BROOK DR	IVE	Date of Receipt  0 9 1 1 2 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.86753
EDINA  FEC ID number of contributing federal political committee.	MN 55439	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	Occupation  VP STRATEGIC INIT/GOVT PROGR/  Aggregate Year-to-Date ▼	AM
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) MR BARRY DAVIS Mailing Address 11 WEISS DR	·	Date of Receipt
	State Zip Code	09 11 2010
City TOWACO	NJ 07082	Transaction ID: INC.A.86968  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 & GENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3840.00	
SUBTOTAL of Receipts This Page (option	nal)	434.30
TOTAL This Period (last page this line nu	mber only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) WARREN DAVIS			Date of Receipt
	Mailing Address 3131 SADDLEGAIT CC	09 11 2010		
	City	State	Zip Code	Transaction ID: INC.A.87215
	GERMANTOWN	TN	38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR BUS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) MR DANIEL DAVISON			Date of Receipt
	Mailing Address 908 STERLING DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.86923
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN	n IANCIAL PLANNING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial)  MR CARLTON DEBRULE			Date of Receipt
	Mailing Address 12 0AKLAND 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.86971
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUSI	n INESS REQUIREMENTS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			130.00
-	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		······	130.00

ITEMIZED RECEIPTS	κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 59 / 438   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS KATHLEEN DEFABIIS			Date of Receipt
Mailing Address 104 HUDSON AVE			09 11 7 2010
City WALDWICK	State NJ	Zip Code 07463	Transaction ID: INC.A.87007  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07400	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT SVC DELIVERY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS			Date of Receipt
Mailing Address N108 W7045 BERKSHIRE STREET			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CEDARBURG	State WI	Zip Code 53012	Transaction ID: INC.A.86848
FEC ID number of contributing federal political committee.	C	30012	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	Year-to-Date ▼ 500.00	]
Full Name (Last, First, Middle Initial) MR PAUL DELLO RUSSO			Date of Receipt
Mailing Address 80 HILLSIDE AVEN	IUE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GLEN RIDGE	State NJ	Zip Code 07028	Transaction ID: INC.A.86805  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07020	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CO		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optiona			75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 438 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	OLITIOAL /	TOTION COMMITTEE (a.ra	, 
MS TONI DEMANSS  Mailing Address 32 RED BARN LANE			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State	Zip Code	Transaction ID: INC.A.87070
WEST MILFORD	NJ	07480	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FINA		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS ANN-MARGARET DEMARCO Mailing Address 1 RUGBY ROAD			Date of Receipt  0 9 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.86640
CEDAR GROVE	NJ	07009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FINA		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
Full Name (Last, First, Middle Initial) MS MAUREEN DEMPSEY			Date of Receipt
Mailing Address 17 RICHWOOD PLACE			09 11 2010
City	State	Zip Code	Transaction ID: INC.A.87088
<u>DENVILLE</u>	NJ	07834	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	<del>'</del>	DICARE COMPLIANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
SUBTOTAL of Receipts This Page (optional)			75.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercial purposes, other than using t  NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per- ne name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR JAMES DENBY  Mailing Address 78 SHERWOOD ST  City CLIFTON	POLITICAL ACTION COMMITTEE (a.k.  State Zip Code NJ 07013	Date of Receipt  0 9 1 1 2 0 1 0  Transaction ID: INC.A.86754  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation SR DIR FINANCE  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) MR PATRICK DENNIS Mailing Address 2344 FRENCH ALPS	S AVE.	Date of Receipt  0 9 1 1 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.86698
HENDERSON  FEC ID number of contributing federal political committee.	NV 89044	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MR JOHN DERRICO		Date of Receipt
Mailing Address 195 HACKENSACK	AVENUE	0 9 1 1 2 0 1 0
City HARRINGTON PARK	State Zip Code NJ 07640	Transaction ID: INC.A.87036  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 MARKETING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		62.50

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 438 (check only one)    X
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) JUDITH DERRINGER  Mailing Address 3306 SHALLOW CO  City	VE COURT	Zip Code	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	CRESTWOOD FEC ID number of contributing federal political committee.	KY	40014	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	Occupation GENERA	n AL MGR - MULTI BRANCH e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) MS LAURA DEVEAU Mailing Address 2289 BEDFORD ST	APT D2		Date of Receipt  0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86839
	STAMFORD	CT	06905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	_,	PRODUCT MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) MS KAREN DEZEARN Mailing Address 4740 BRINKLEY LAN	IE NE		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
	City	State	Zip Code	Transaction ID: INC.A.86603
	ATLANTA FEC ID number of contributing federal political committee.	GA C	30342	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	n L ACCT EXEC	7
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 63 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR FRANK DICALOGERO			Date of Receipt
Mailing Address 36 ARTHUR STRE	ET		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RIDGEFIELD PARK	State NJ	Zip Code 07660	Transaction ID: INC.A.86633  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MS TAMARA DIDYK			Date of Receipt
Mailing Address 136 BEAVER RUN	RD		M M / D D / Y Y Y Y O D D / 2010
City LAFAYETTE	State NJ	Zip Code 07848	Transaction ID: INC.A.86852
FEC ID number of contributing federal political committee.	C	07040	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FNT	n ERPRISE OPS	
Receipt For:  Primary General  Other (specify) ▼	- <del>                                    </del>	Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MS PATRICIA DODDS			Date of Receipt
Mailing Address 28W250 RIVIERA	СТ		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BARTLETT	State IL	Zip Code 60103	Transaction ID: INC.A.86659  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00100	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation SPECIAL	TY NATL SALES EXEC	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional			62.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 64 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) ANDREW DOEDYNS			Date of Receipt
Mailing Address 117 CREST DRIVE	<b>=</b>		09 11 2010
City BEAVER	State PA	Zip Code 15009	Transaction ID: INC.A.87175
FEC ID number of contributing federal political committee.	C	13009	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR REG	n RIONAL OPS	
Receipt For:  Primary  General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR ROBERT DOLAN			Date of Receipt
Mailing Address 9 CRANE AVENUE	Ξ		0 9 1 1 2 0 1 0
City WEST CALDWELL	State NJ	Zip Code 07006	Transaction ID: INC.A.86905  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS JUDITH DONNELLY			Date of Receipt
Mailing Address 3 IRONWORKS Re	OAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MONROE	State NY	Zip Code 10950	Transaction ID: INC.A.87004
FEC ID number of contributing federal political committee.	C	10330	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
Receipt For:  Primary General  Other (specify) ▼	- <del>  '</del>	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (options	I		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any per ename and address of any political committee POLITICAL ACTION COMMITTEE (a.k	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS LYNDA DOREMUS  Mailing Address 16 E HOMESTEAD A'  City COLLINGSWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 08108  C  Occupation DIR PHARM PRACTICE Aggregate Year-to-Date  500.00	Date of Receipt    M   M   D   D   2 0 1 0   Transaction ID: INC.A.86823   Amount of Each Receipt this Period   25.00
Full Name (Last, First, Middle Initial) MS MERIDITH DORNER Mailing Address 8010 ORCHARD VIEV  City FOGELSVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) STEPHANIE DUCKER  Mailing Address 4630 HICKORY RIDG  City EUREKA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code MO 63025  C  Occupation VP SALES  Aggregate Year-to-Date  250.00	Date of Receipt  M M J D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  And information period from such Reports and	for each category of the  Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persor the name and address of any political committee to sold.  C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MICHEL DUFRESNE Mailing Address 41ELM ST APT 3P		Date of Receipt
City	State Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.87049
MORRISTOWN	NJ 07960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENTERPRISE BUS INTELLIGENCE	一 生
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3846.00	
Full Name (Last, First, Middle Initial)  MR DANA DUNCAN		Date of Receipt
Mailing Address 125 COMSTOCK T	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.86827
EAST HAMPTON	CT 06424	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY		Date of Receipt
Mailing Address 2 DECKER TERRA	CE	09 11 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.86662
KINNELON	NJ 07405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optiona	l)	242.30

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	name and address of any political o	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.  TEE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY Mailing Address 14026 KNOX STREE  City OVERLAND PARK FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code KS 66221  C  Occupation VP SALES SEGMENT LEA  Aggregate Year-to-Date	000.00
Full Name (Last, First, Middle Initial) MR MARK DUNN Mailing Address 2 OLD MILL ROAD  City SANDY HOOK FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code CT 06482  C  Occupation SR DIR TECHNOLOGY  Aggregate 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
Full Name (Last, First, Middle Initial) MR PETER DURAN  Mailing Address 875 HARRISTOWN F  City GLEN ROCK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07452  C  Occupation DIR PRIVACY Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86646  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional) .		110.00

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 68 / 438   (check only one)
Any informati or for comme	ion copied from such Reports and ercial purposes, other than using the	Statements mane name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	F COMMITTEE (In Full) ) HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
	e (Last, First, Middle Initial) NNE DURY			Date of Receipt
Mailing Ad	ddress 147 MIDLAND AVE			0 9 1 1 2 0 1 0
City	NDOE	State	Zip Code	Transaction ID: INC.A.86904
	umber of contributing olitical committee.	C	07656	Amount of Each Receipt this Period  25.00
Name of E MEDCO	Employer HEALTH SOLUTIONS	Occupatio DIR BUS	n BINESS REQUIREMENTS	
	or: mary General er (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	e (Last, First, Middle Initial)			Date of Receipt
	ddress 1400 POPLAR ESTA			09 11 2010
City GERMA	NTOWN	State TN	Zip Code 38138	Transaction ID: INC.A.87196  Amount of Each Receipt this Period
FEC ID n	umber of contributing olitical committee.	C		25.00
Name of E ACCRED	Employer OO HEALTH GROUP	Occupatio DIR RN	n PERF MGMT & IMPROVEM	ENT
	or: mary General er (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	e (Last, First, Middle Initial) NE EDLIN			Date of Receipt
Mailing Ad		EET		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CORNW	VALI	State NY	Zip Code 12518	Transaction ID: INC.A.86976  Amount of Each Receipt this Period
FEC ID n	umber of contributing political committee.	C	12010	25.00
Name of E MEDCO	Employer HEALTH SOLUTIONS	Occupatio VP SALE		
	or: mary General er (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	of Receipts This Page (optional)	1		75.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS JANET EDWARDS	DOE LANE		Date of Receipt
	Mailing Address N8W27837 WOODRII	DGE LANE		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87095
	WAUKESHA	WI	53188	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLII	on NICAL SVCS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
- В.	Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS			Date of Receipt
	Mailing Address 109 KAREN PLACE			09 / 11 / 2010
	City	State	Zip Code	Transaction ID: INC.A.86653
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		1000.00	
- C.	Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD			Date of Receipt
	Mailing Address 128 SUMMIT AVENUE	Ξ		09 / 11 / 2010
	City UPPER MONTCLAIR	State NJ	Zip Code 07043	Transaction ID: INC.A.87074  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07040	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MEDICA	on RE CHIEF MEDICAL OFFIC	== ER
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 950.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number	only)		

	HEDULE A (FEC Form 3X)  EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16		
or fo	information copied from such Reports and Sor commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions		
\	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
. <u>!</u>	Full Name (Last, First, Middle Initial) MR FREDERICK ELSTON Mailing Address 106 GRAHAM TERRA	CE		Date of Receipt  M M M / D D / Y Y Y Y Y		
-	Dity	State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.86890		
	SADDLE BROOK	NJ	07663	Amount of Each Receipt this Period		
	FEC ID number of contributing ederal political committee.	C		25.00		
<u>1</u> 1	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNIC	n CAL SPECIALIST			
Ī	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00			
1	Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN			Date of Receipt		
ľ	Mailing Address 359 LONG HILL ROAI	ing Address 359 LONG HILL ROAD EAST				
	City	State	Zip Code	Transaction ID: INC.A.87076		
-	BRIARCLIFF MANOR	NY	10510	Amount of Each Receipt this Period		
f -	FEC ID number of contributing ederal political committee.	C		50.00		
1	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP COR	n P COMMUNICATIONS			
F	Receipt For: Primary General	Aggregate	e Year-to-Date ▼			
	Other (specify)		1000.00			
	Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN			Date of Receipt		
ľ	Mailing Address 75 TWEED BLVD			09 11 2010		
	Dity CRANDVIEW	State NY	Zip Code	Transaction ID: INC.A.86552		
F	UPPER GRANDVIEW FEC ID number of contributing ederal political committee.	C	10960	Amount of Each Receipt this Period  192.31		
<u>1</u> 1	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio CMO SV	n P MEDICAL&ANLYTC AFFF			
Ī	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3846.20			
		•		267.31		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE /1 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR SCOTT ERHARDT			Date of Receipt
Mailing Address 11540 39TH AVE N	J		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.86760
PLYMOUTH  FEC ID number of contributing federal political committee.	C	55441	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R ACCT MGMT	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR YAKOV ESTERLIS			Date of Receipt
Mailing Address 100 WINSTON DR 17 C NORTH	IVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CLIFFSIDE PARK	State NJ	Zip Code 07010	Transaction ID: INC.A.87009  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07010	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 3	TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	- <del>                                    </del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR BRIAN EZROW			Date of Receipt
Mailing Address 2524 WIEAND RO	AD		M M / D D / Y Y Y Y Y O D D / 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.86710
QUAKERTOWN FEC ID number of contributing federal political committee.	C	18951	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n E-COM STRAT & DELI	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		100.00

•	TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
<b>A</b> .	Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI Mailing Address 15804 SORAWATER	DD		Date of Receipt
	13804 SORAWATER	DN.		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86676
	<u>LITHIA</u>	FL	33547	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	]
- 3.	Full Name (Last, First, Middle Initial) RICHARD FARIS			Date of Receipt
	Mailing Address 2020 HEATHER COV	E		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87213
	MEMPHIS	TN	38119	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer ACCREDO HEALTH GROUP	- · ·	LTH OUTCOME SOLUTION	S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) SUSAN FAUST			Date of Receipt
	Mailing Address 6614 HERONSWOOI			09 11 2010
	City MEMPHIS	State TN	Zip Code 38119	Transaction ID: INC.A.87181
	FEC ID number of contributing federal political committee.	C	30119	Amount of Each Receipt this Period  50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLIE	n NT SLS AND MGD CARE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
\[\frac{1}{5}\]	SUBTOTAL of Receipts This Page (optional) .	1		150.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	) 	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)	and Statements may ng the name and addr	not be sold or used by any persects of any political committee to	on for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS I	NC. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA  Mailing Address 2354 DOLPHIN (	XT		Date of Receipt
City	State	Zip Code	09 11 2010
HENDERSON	NV	89074	Transaction ID: INC.A.86807  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHAF	RM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 1359.51	
Full Name (Last, First, Middle Initial) DR RICHARD FEIFER			Date of Receipt
Mailing Address 32 EILEEN DR			09 11 2010
City MAHWAH	State NJ	Zip Code	Transaction ID: INC.A.86742
FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CARE	ENHANCING SOLUTIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR THOMAS FEITEL			Date of Receipt
Mailing Address 58 APPLE HILL [	PR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GILLETTE	State NJ	Zip Code 07933	Transaction ID: INC.A.86811  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 COR	P MKTG & E-COMM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 3844.60	
SUBTOTAL of Receipts This Page (option	nal)		257.23

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR STUART FELDMAN  Meiling Address (100 MF A DOWNED COL	/ DOAD		Date of Receipt
	Mailing Address 109 MEADOWBROOK	09 11 2010		
	City	State	Zip Code	Transaction ID: INC.A.86549
	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	Occupatio EXEC DI	n IR TECHNOLOGY	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) MS DAWN FELDNER			Date of Receipt
	Mailing Address 275 BIRCH STREET			09 / 11 / 2010
	City EMERSON	State NJ	Zip Code	Transaction ID: INC.A.86977
	FEC ID number of contributing federal political committee.	C	07630	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS REQUIREMENTS	S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) MR THOMAS FERRAZZANO			Date of Receipt
	Mailing Address 464 SPRING AVE.			09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86924
	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		TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number		<u> </u>	

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S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 75 / 438
ľ	EMIZED RECEIPTS		for each category of the	(check only one)
	EIVIIZED NEGEIP I 3	Detailed Summary Page	X 11a 11b 11c 12	
			.,	13 14 15 16 17
	Any information copied from such Reports and Sta	tements ma	v not be sold or used by any perso	n for the purpose of soliciting contributions
0	or for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
$\vdash$	NAME OF COMMITTEE (In Full)			
`	` ′	N ITIOAL	ACTION COMMUTTEE ( )	Marker Health DAO
	MEDCO HEALTH SOLUTIONS INC. PC	)LITICAL /	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MS EDYTHE FERRIS			Date of Receipt
٠.	Mailing Address 246 SLATER RD	M M / D D / Y Y Y Y		
	Mailing Address 246 SLATER RD			09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86643
	TOLLAND	CT	06084	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	7
	MEDCO HEALTH SOLUTIONS		R CLINICAL SVCS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	99. 39410		ı İ
	Other (specify) ▼		475.00	
			0 0 0 0 0 0 0	
_  -	Full Name (Last, First, Middle Initial) RONALD FIELMANN			Date of Receipt
•				<b>─</b>
	Mailing Address 2061 ARLEEN CT			09 11 7 2010
	City	State	Zip Code	Transaction ID: INC.A.87182
	SCHAUMBURG	IL	60194	Amount of Each Receipt this Period
	FEC ID number of contributing	-		
	federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio	n	
	ACCREDO HEALTH GROUP	AVP SAL	.ES	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1.99.19		
	Other (specify) ▼		500.00	
			0 0 0 0 0 0 0	
_	Full Name (Last, First, Middle Initial)			
<b>:</b>	MR DON FISCHER			Date of Receipt
	Mailing Address 10 TRACY CIRCLE			0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86663
	CAMPBELL HALL	NY	10916	
	•	111	10910	Amount of Each Receipt this Period
	FEC ID number of contributing	C		25.00
	federal political committee.			
	Name of Employer	Occupatio	n	7
	Name of Employer MEDCO HEALTH SOLUTIONS		TECHNOLOGY	
	Receipt For:	I	Year-to-Date ▼	
	Primary General	, iggi ogale	ca. to Bato .	
	Other (specify)		500.00	
	Curor (Specify)		0 0 0 0 0 0 0	
_				
- [				
	SUBTOTAL of Receipts This Page (optional)			75.00
⊢				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 438 (check only one)    X
A		Statements may not be sold or used by any per e name and address of any political 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) MR EDWARD FISCHER		Date of Receipt
	Mailing Address 465 OLD STONE RD	Ohaka 7:n Ohaka	0 9
	City RIDGEWOOD	State Zip Code NJ 07450	Transaction ID: INC.A.86727  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL PROD INTEGRATIO	N
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) MS THERESA FITCH	I	Date of Receipt
	Mailing Address 180 COOK STREET #107		09 11 2010
	City	State Zip Code	Transaction ID: INC.A.87172
	<u>DENVER</u>	CO 80206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
	Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
	Other (specify)	500.00	
	Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS	1	Date of Receipt
	Mailing Address 1933 MT. OLIVE AGOSTA ROAD		0 9 1 1 2 0 1 0
	City	State Zip Code	Transaction ID: INC.A.86862
	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	Occupation SR DIR HLTH CARE OPS	
	Receipt For:  Primary  General	Aggregate Year-to-Date ▼	_
	Other (specify) ▼	500.00	
	SUBTOTAL of Receipts This Page (optional) .	•	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	he name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JOHN FORD Mailing Address 6 SILVER LAKE DRI	VE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SHAMONG FEC ID number of contributing	State NJ	Zip Code 08088	Transaction ID: INC.A.86826  Amount of Each Receipt this Period
rederal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation DIR OPS Aggregate	Year-to-Date ▼	15.00
Other (specify)  Full Name (Last, First, Middle Initial) CHAD FOREMAN Mailing Address 9544 DOGWOOD E	STATES	585.00	Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  GERMANTOWN  FEC ID number of contributing federal political committee.	State TN	Zip Code 38139	Transaction ID: INC.A.87220  Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  Other (specify) ▼	Occupation DIR FINA Aggregate		
Full Name (Last, First, Middle Initial) HOLLEY FORTH Mailing Address 115 BAYSIDE COUF	RT		Date of Receipt    M   M   D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City RICHMOND FEC ID number of contributing federal political committee.	State CA	Zip Code 94804	Transaction ID: INC.A.87210  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	<del>- , '</del>	DDUCT LINE Year-to-Date ▼	1
Other (specify) ▼		500.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 78 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) KEVIN FRANCO			Date of Receipt
Mailing Address 140 BELLAIR ROA UNIT Q	D		09 11 2010
City	State	Zip Code	Transaction ID: INC.A.86939
RIDGEWOOD  FEC ID number of contributing federal political committee.	NJ C	07450	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F		
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt
Mailing Address 9 GREEN HILL TRA	AIL		09 111 2010
City TROPHY CLUB	State TX	Zip Code	Transaction ID: INC.A.86881
FEC ID number of contributing federal political committee.	C	76262	Amount of Each Receipt this Period  100.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP NAT	IONAL SERVICE CENTER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2896.10	
Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL			Date of Receipt
Mailing Address 1434 NARRAGANS	SETT 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.86686
CRANSTON FEC ID number of contributing federal political committee.	C	02905	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR GOV	AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional	al)		180.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 438 (check only one)    X   11a
,	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ì	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) FELIX FRUEH Mailing Address 14401 FALLING I FAE	· DDIVE		Date of Receipt
	Mailing Address 14401 FALLING LEAF	09 11 2010		
	City	State	Zip Code	Transaction ID: INC.A.87138
	DARNESTOWN	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP RES	on EARCH & DEVELOPMENT	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼	0 0	1000.00	
_ В.	Full Name (Last, First, Middle Initial) MR TRACY FURGIUELE	•		Date of Receipt
	Mailing Address 7773 TILLINGHAST DRIVE			0 9 1 1 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.86958
	DUBLIN	OH	43017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & C	on CHIEF PHARMACIST	
			e Year-to-Date ▼	
	Primary General Other (specify) ▼		700.00	
_ С.	Full Name (Last, First, Middle Initial) ROBERT FURTH			Date of Receipt
	Mailing Address 1450 PORTLAND AVE	ENUE		09 11 2010
	City ST PAUL	State MN	Zip Code 55104	Transaction ID: INC.A.87193  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33104	25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation GENERA		
	Receipt For:  Primary General  Other (specify) ▼	. '	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			110.00
<b> </b>	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 438 (check only one)    X
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS CARISSA GABOROW			Date of Receipt
Mailing Address 6 JUHASZ ROAD			09 11 2010
City	State	Zip Code	Transaction ID: INC.A.86845
NORWALK	CT	06854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI			Date of Receipt
Mailing Address 24 MOREHOUSE PL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NEW PROVIDENCE	State NJ	Zip Code 07974	Transaction ID: INC.A.86548  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07074	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP & CC		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI			Date of Receipt
Mailing Address 720 N. LARRABEE APT 1701			M M / D D / Y Y Y Y Y O D D / Y D D D D D D D D D D D D D D D D
City	State	Zip Code	Transaction ID: INC.A.87021
CHICAGO	IL	60654	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & G	n ENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3846.20	
SUBTOTAL of Receipts This Page (optional)			267.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for e	separate schedule(s) ach category of the illed Summary Page	FOR LINE NUMBER: PAGE 81 / 438 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	the name and address of	any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS PATRICIA GALLAGHER Mailing Address 842 ASHLER 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 COLUMBUS FEC ID number of contributing		Code 235	Transaction ID: INC.A.86978  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  Other (specify) ▼	Occupation NATL ACCT EX Aggregate Year-to		1
Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO Mailing Address 69 LAKEVIEW DR			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OLD TAPPAN  FEC ID number of contributing federal political committee.		0 Code 675	Transaction ID: INC.A.86857  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP CLIENT RE Aggregate Year-to		
Full Name (Last, First, Middle Initial)  MICHAEL GALVIN  Mailing Address 25 BALLYMEADE	ROAD		Date of Receipt
City HOPEWELL JUNCTION FEC ID number of contributing federal political committee.	State Zip	0 Code 533	Transaction ID: INC.A.87054  Amount of Each Receipt this Period  192.31
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation SVP/CHIEF INF Aggregate Year-to	FRASTRUCTURE OF Property of the Property of t	FR
SUBTOTAL of Receipts This Page (optional	J)		267.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any persename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR OMHARAISRIRAM GANGAIKONDAN-IYER  Mailing Address 9 CAIRNES ROAD  City  MORRIS PLAINS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07950  C  Occupation DIR TECHNOLOGY  Aggregate Year-to-Date   500.00	Date of Receipt  M M M D D D 2010  Transaction ID: INC.A.87063  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR PETER GAYLORD  Mailing Address 1201 BRIDGE STREE  City ASBURY PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07712  C  Occupation SVP TREASURY & FINANCIAL EVA Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86547  Amount of Each Receipt this Period  60.00
Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA  Mailing Address 20 BROOKSHIRE DR  City ROBBINSVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 08691  C  Occupation VP/GM  Aggregate Year-to-Date   1000.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: INC.A.86700  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional) .		135.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ 4.	Full Name (Last, First, Middle Initial) MATTHEW GIBBS Mailing Address OZ N. WACKER DR		`	Date of Receipt
	Mailing Address 27 N. WACKER DR. SUITE 246	01-1-	7'- 0-4-	09 11 2010
	City CHICAGO	State IL	Zip Code 60606	Transaction ID: INC.A.87125  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF C	n CLINICAL OFFICER	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	
3.	Full Name (Last, First, Middle Initial) MR ROBERT GIBBS Mailing Address 544 DENMOOR COUR	PT		Date of Receipt
				09 11 2010
	City GALLOWAY	State OH	Zip Code 43119	Transaction ID: INC.A.86625  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 487.50	
- ;.	Full Name (Last, First, Middle Initial) MR THOMAS GILSON			Date of Receipt
	Mailing Address 2 PELL FARM ROAD			09 / 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.87013
	SADDLE RIVER  FEC ID number of contributing federal political committee.	NJ C	07458	Amount of Each Receipt this Period 192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n BENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 3846.20	
	SUBTOTAL of Receipts This Page (optional)			279.81
T	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 438 (check only one)    X   11a
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	ly not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR SCOTT GILYARD			Date of Receipt
	Mailing Address 305 BERGAMOT DR	09 / 11 / 2010		
	City MEDINA	State MN	Zip Code 55340	Transaction ID: INC.A.86553  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES U		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3846.00	
Б.	Full Name (Last, First, Middle Initial) MR JONAH GITLITZ  Mailing Address 43 OVERLOOK RIDG	Date of Receipt		
	City	State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.86637
	OAKLAND NJ		07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	on L ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- С.	Full Name (Last, First, Middle Initial) MR JOHN GOBINSKI			Date of Receipt
	Mailing Address 28 BARBARA DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City WARWICK	State NY	Zip Code 10990	Transaction ID: INC.A.86720  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR E-C	on OM STRAT & DELIV	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			267.30
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 438 (check only one)    X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			n for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F Full Name (Last, First, Middle Initial)	POLITICAL	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
A.	MR PAUL GOERDT  Mailing Address 1700 SUNRISE COUF			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City BURNSVILLE	State MN	Zip Code 55306	Transaction ID: INC.A.86824  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIN	n IICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date  1000.00	
В.	Full Name (Last, First, Middle Initial) MS AUDREY GOODMAN Mailing Address 26 HILLSIDE AVE.			Date of Receipt
	City	State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.86940
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ORG		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
C.	Full Name (Last, First, Middle Initial) MR JAMES GORMAN			Date of Receipt
	Mailing Address 11 WASHBURN RD			0 9 1 1 2 0 1 0
	City CANTON	State CT	Zip Code 06022	Transaction ID: INC.A.86642  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 CLIENT & MKT PROG STRA	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		<b>)</b>	90.00
	TOTAL This Period (last page this line number	only)	<b>&gt;</b>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 438 (check only one)    X
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES GRANT, II  Mailing Address 1928 BEVERLY LANE  City BUFFALO GROVE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State IL C Occupatio VP FINA	Zip Code 60089  n NCIAL INSIGHTS e Year-to-Date ▼ 1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) LAURIE GREENBERG  Mailing Address 27760 WOODLAND C  City BOERNE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State TX  C  Occupatio SR DIR (	Zip Code 78015  n CLINICAL THERAPEUTICS e Year-to-Date   500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MR EDWARD GRIX  Mailing Address 525 ORANGEBURG I  City  PEARL RIVER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State NY  C  Occupatio SR DIR I	Zip Code 10965  n BUSINESS REQUIREMENTS e Year-to-Date  500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line number			100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS GINA GRUHN Mailing Address 13 WEATHER VANE  City CONVENT STATION  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupation REGION	AL VP SALES-SYSTEMED  Year-to-Date   800.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 1 1 2 0 1 0  Transaction ID: INC.A.86797  Amount of Each Receipt this Period  40.00
Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD  Mailing Address 211 NORTH END AVE APT 3C  City  NEW YORK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State NY  C Occupation VP CONS	Zip Code 10282  n SUMER DRIVEN MKTS Year-to-Date  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS CAROLYN GUGLIELMO  Mailing Address 42 VETERANS PARK  City PEARL RIVER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NY  C Occupation NATL AC	Zip Code 10965 n CCT EXEC Year-to-Date ▼	Date of Receipt  M M M D D D 2010  Transaction ID: INC.A.86941  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)			115.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 438 (check only one)    X
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MR RICHARD GUIOR			Date of Receipt
	Mailing Address 50 BELLEVUE AVE			09 11 2010
	City SUMMIT	State NJ	Zip Code 07901	Transaction ID: INC.A.86571  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		90.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1800.00	
	Full Name (Last, First, Middle Initial) MS KAVITHA GULLAPALLI			Date of Receipt
	Mailing Address 67 ATHERTON CT			09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86718
	WAYNE	NJ	07470	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) MS VALERIE HAERTEL			Date of Receipt
	Mailing Address 7 PARSLOE COURT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MAHWAH	State NJ	Zip Code	Transaction ID: INC.A.87106
	FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INVE	sTOR RELATIONS	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional) .	1		165.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	38)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 89 / 438   (check only one)
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may sing the name and addr	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	INC. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RICHARD HALPERN			Date of Receipt
Mailing Address 23 MAPLEMOO	R LANE		0 9 1 1 2 0 1 0
City WHITE PLAINS	State NY	Zip Code 10605	Transaction ID: INC.A.86635  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 TECH	INOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<u>'</u>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MRS INCORONATA HAMWAY	<u> </u>		Date of Receipt
Mailing Address 7 ALLYSON CT	M M / D D / Y Y Y Y O D D / 2010		
City LONG VALLEY	State NJ	Zip Code 07853	Transaction ID: INC.A.86934
FEC ID number of contributing federal political committee.	C	07655	Amount of Each Receipt this Period  20.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CS S	YSTEMS PLAN & IMPLEM	
Receipt For:  Primary General  Other (specify) ▼	'	Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) MR GREGORY HANSEN			Date of Receipt
Mailing Address 1659 ISABELLA	PARKWAY		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CHASKA	State MN	Zip Code 55318	Transaction ID: INC.A.87020  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33310	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACCT	SVCS & ADMIN	
Receipt For:  Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (opti	onal)		95.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 438 (check only one)    X   11a	
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
Full Name (Last, First, Middle Initial) MR CHRISTOPHER HARLOW			Date of Receipt	
Mailing Address 8 PROSPECT PLACE			0 9 1 1 2 0 1 0	
City	State	Zip Code	Transaction ID: INC.A.86615	
POMPTON PLAINS	NJ	07444	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		25.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n FINANCE		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) SHARON HARRIS	1		Date of Receipt	
Mailing Address 186 N. WHITE STATION	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City				
MEMPHIS	TN	38117	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		25.00	
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HR	n		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) MS SHANA HART	1		Date of Receipt	
Mailing Address 20 FAIR GREEN DRIV	/E		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.86791	
TROPHY CLUB	TX	76262	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n _ ACCT EXEC		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00		
_		0 0 0 0 0 0 0	100	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persithe name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR MARK HARTMANN  Mailing Address 8980 KNOBLE COU  City  EDEN PRAIRIE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  Other (specify)		Date of Receipt  O 9 11 2010  Transaction ID: INC.A.86762  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR PETER HARTY Mailing Address 19520 YELLOW WII  City COLORADO SPRINGS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	NG COURT  State Zip Code CO 80908  C  Occupation VP GOVERNMENT AFFAIRS  Aggregate Year-to-Date ▼  3846.20	Date of Receipt    M M
Full Name (Last, First, Middle Initial) DAN HAYES  Mailing Address 4679 AYRON TERR  City PALM HARBOR  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code FL 34685  C  Occupation VP OPS  Aggregate Year-to-Date   500.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)	)	242.31

	FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 438 (check only one)    X
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD			Date of Receipt
	Mailing Address 13210 N. 11TH AVE.	09 11 2010		
	City	State	Zip Code	Transaction ID: INC.A.86658
	PHOENIX	AZ	85029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
	Primary General Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) MR THOMAS HEKKER			Date of Receipt
	Mailing Address 28 WEST THRID STF	0 9 1 1 2 0 1 0		
	City	State	Zip Code	Transaction ID: INC.A.87060
	SOUTH ORANGE  FEC ID number of contributing federal political committee.  C		07079	Amount of Each Receipt this Period
				30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR T	i ECHNOLOGY	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	0 0	600.00	
. –	Full Name (Last, First, Middle Initial) MR SCOTT HELMUS			Date of Receipt
	Mailing Address 23 VALLEY RD	0 9 1 1 2 0 1 0		
	City	State	Zip Code	Transaction ID: INC.A.86631
	SUCCASUNNA	NJ	07876	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer MEDCO HEALTH SOLUTIONS		NT SOLUTIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2100.00	
	SUBTOTAL of Receipts This Page (optional)	1		180.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 438 (check only one)  X 11a 11b 11c 12 12 15 16 17
	Any information copied from such Reports and State or for commercial purposes, other than using the result of NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. PORTIONS INC. PORTIONS INC.	name and add	dress of any political committee to	solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) MR GLENN HERDLING Mailing Address 646 JAMES LN  City RIVER VALE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07675 on EATIVE DEVELOPMENT e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.86779  Amount of Each Receipt this Period  25.00
В.	Full Name (Last, First, Middle Initial) MS PATRICIA HERZBERG Mailing Address 302 AUTUMN HILL DR  City MORGANVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	-	Zip Code 07751 on GENERIC DRUG PURCHAS 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) MR ERIC HESS  Mailing Address 10 CARLTON RD  City FLANDERS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	-	Zip Code 07836 on INEERING & OPS e Year-to-Date ▼	Date of Receipt  M M / D D / 2 0 1 0  Transaction ID: INC.A.86731  Amount of Each Receipt this Period  60.00
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		<u> </u>	110.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JANE HILDEBRANDT Mailing Address 35 CASCADE WAY  City BUTLER FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Zip Code 07405 n OM STRAT & DELIV e Year-to-Date ▼	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR DANIEL HLUDZINSKI Mailing Address 385 WASHINGTON S  City TAPPAN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NY  C Occupation TECHNIG	Zip Code 10983	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87002  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON  Mailing Address 16 LUTH TERRACE  City WEST ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	<del>- '</del>	Zip Code 07052 n ARMACY OPS 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
SUBTOTAL of Receipts This Page (optional) .			242.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 438   (check only one)   X   11a
A	Any information copied from such Reports and or for commercial purposes, other than using the	Statements man	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN			Date of Receipt
	Mailing Address 974 HILLCREST RO	AD		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.86942
	RIDGEWOOD  FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FACI		
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) MR TIMOTHY HOGAN			Date of Receipt
	Mailing Address 9 HIRLE ST	0 9 1 1 1 2 0 1 0		
	City CORNWALL ON HUDSON	State NY	Zip Code 12520	Transaction ID: INC.A.86752
	FEC ID number of contributing federal political committee.	C	12320	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNI	n CAL SPECIALIST	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
. –	Full Name (Last, First, Middle Initial) MR ROGER HOLLAND			Date of Receipt
•	Mailing Address 41 SAINT RAPHAEL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City LAGUNA NIGUEL	State CA	Zip Code 92677	Transaction ID: INC.A.86853
	FEC ID number of contributing federal political committee.	C	32011	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
十	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number			125.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JOHN HOLLINGER			Date of Receipt
	Mailing Address 784 CAPE HENRY DF	09 11 7 2010		
	City COLUMBUS	State OH	Zip Code 43228	Transaction ID: INC.A.86864
	FEC ID number of contributing federal political committee.	C	43220	Amount of Each Receipt this Period  10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	on SINESS PLANNING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 390.00	
В.	Full Name (Last, First, Middle Initial) MR ROBERT HOLLIS Mailing Address 99 MILLS STREET			Date of Receipt
	Mailing Address 88 MILLS STREET			09 11 7 2010
	City	State	Zip Code	Transaction ID: INC.A.86737
	MORRISTOWN  FEC ID number of contributing federal political committee.	NJ C	07960	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on INTERNATL BUSINESS DE	/
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
C.	Full Name (Last, First, Middle Initial) ELIZABETH HOLLOWAY			Date of Receipt
	Mailing Address 9222 RANDLE VALLE	Y DR		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87208
	CORDOVA  FEC ID number of contributing federal political committee.	C	38018	Amount of Each Receipt this Period 40.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation ASSISTA	on ANT GENERAL COUNSEL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 438 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MATTHEW HOLMES			Date of Receipt
Mailing Address 789 WESTON PARK D	PR		0 9 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.86816
POWELL	OH	43065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK			Date of Receipt
Mailing Address 5 SUNCLIFF 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.86888
TARRYTOWN	NY	10591	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INTE	n RVENTION DELIVERY SYS	<del>-</del> T
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) RITA HOLT			Date of Receipt
Mailing Address 1558 N PISGAH ROAD	)		0 9 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87186
CORDOVA	TN	38016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIM	n MBURSEMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			155.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 438 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS CYNTHIA HORN  Mailing Address 9553 ANDREW DR			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TWINSBURG FEC ID number of contributing	State OH	Zip Code 44087	Transaction ID: INC.A.87173  Amount of Each Receipt this Period  50.00
Receipt For:  Primary  Other (specify)  General  General	Occupation VP CUS		1
Full Name (Last, First, Middle Initial) MR STEVEN HOROWITZ Mailing Address 4 MELISSA COURT			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  MONTVILLE  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07045	Transaction ID: INC.A.87100  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		NESS PLANNING  P Year-to-Date   1000.00	]
Full Name (Last, First, Middle Initial) LYNN HOSTMYER  Mailing Address 6708 N.W. 112TH			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 OKLAHOMA CITY FEC ID number of contributing federal political committee.	State OK	Zip Code 73162	Transaction ID: INC.A.87192  Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼	<del>- ' '</del>	n AL MGR - MULTI BRANCH e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	)		125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BERNARD HUKILL Mailing Address 17219 CLOVIS  City HELOTES FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Zip Code 78023 n NRM OPS e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86915  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR JEFFREY HULL Mailing Address 2616 S 3B'S & K RD City GALENA FEC ID number of contributing	State OH	Zip Code 43021	Date of Receipt  M M M / D D / Y Y Y Y Y  0 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86865  Amount of Each Receipt this Period  32.00
Receipt For:  Primary  Other (specify) ▼	<del>- ' '</del>	n HLTH CARE OPS • Year-to-Date ▼ 640.00	
Full Name (Last, First, Middle Initial) MR DONALD HUMPHREY Mailing Address 93 WINCHESTER D  City MONROE  FEC ID number of contributing federal political committee.	State NY	Zip Code 10950	Date of Receipt    M M M
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>- ' '</del>	n TECHNOLOGY • Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	)		107.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
,	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MRS KIMBERLY HUMPHRIES  Mailing Address 10010 POINTE COVE			Date of Receipt
	City	State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.87209
	LAKELAND	TN	38002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUSI	n NESS PLANNING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
— В.	Full Name (Last, First, Middle Initial) MR DAVID ISRAEL			Date of Receipt
	Mailing Address 730 COLUMBUS AVEN		7.0.1	09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86555
	NEW YORK	NY	10025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		STAKEHOLDER RELATIO	NS
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
с. С.	Full Name (Last, First, Middle Initial) MS SUSAN ITO			Date of Receipt
	Mailing Address 6366 SW 90TH STREE	ĒΤ		09 11 7 2010
	City	State	Zip Code	Transaction ID: INC.A.86566
	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		R CLINICAL SVCS	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	950.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number of		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS MARIANNE JACKS			Date of Receipt
	Mailing Address 329 MORRIS AVENUE  City	= State	Zip Code	0 9 1 1 2 0 1 0  Transaction ID: INC.A.86606
	MOUNTAIN LAKES	NJ	07046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n - ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
- В.	Full Name (Last, First, Middle Initial) BRENDA JACKSON			Date of Receipt
	Mailing Address 1841 BROADHAVEN [	DRIVE		09 11 7 2010
	City	State	Zip Code	Transaction ID: INC.A.87107
	MIDDLEBURG  FEC ID number of contributing federal political committee.	FL C	32068	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n PRODUCT DEVELOPMENT	
	Receipt For:  Primary  General  Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) MS TERESE JACKSON			Date of Receipt
	Mailing Address 6085 S. PRESTON LA	NE		0 9 1 1 2 0 1 0
	City	State WI	Zip Code	Transaction ID: INC.A.86632
	NEW BERLIN  FEC ID number of contributing federal political committee.	C	53151	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n - ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
-	TOTAL This Period (last page this line number		·	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any personderss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS MICHELLE JAEGER Mailing Address 302 HERMAN TERRA	105		Date of Receipt
	Walling Address 302 HERWAN TERRA	ACE		09 11 7 2010
	City	State	Zip Code	Transaction ID: INC.A.87065
	HOPKINS	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n L ACCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
— В.	Full Name (Last, First, Middle Initial) MR JASON JAMES			Date of Receipt
	Mailing Address RR 2 BOX 2036			0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86559
	CANADENSIS	PA	18325	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHY	n 'SICIAN ENGAGEMENT	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Other (specify)		700.00	
_ С.	Full Name (Last, First, Middle Initial) MR TODD JEFFREY			Date of Receipt
	Mailing Address 15 ELIZABETH STRE	ET		09 11 7 2010
	City DUMONT	State	Zip Code	Transaction ID: INC.A.87005
		NJ	07628	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PHAI	n RM CONTRACT & CONSUL	TING
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Primary General Other (specify) ▼		1000.00	
	SUBTOTAL of Receipts This Page (optional) .			110.00
卜	TOTAL This Period (last page this line numbe		<u> </u>	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 438 (check only one)    X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.
<b>∠</b> <b>A</b> .	Full Name (Last, First, Middle Initial) ROBERT JINKS Mailing Address 22 PAGE AVE  City LYNDHURST  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C Occupation VP BUSI	Zip Code 07071	Date of Receipt  M M M / D D / 2 0 1 0  Transaction ID: INC.A.86621  Amount of Each Receipt this Period  50.00
_	Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate	year-to-Date ▼ 1000.00	
3.	MR WILLIAM JOEL Mailing Address 32 VENTOSA DR			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City	State	Zip Code	Transaction ID: INC.A.86801
	MORRISTOWN FEC ID number of contributing federal political committee.	C	07960	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		LYTICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
. –	Full Name (Last, First, Middle Initial) CHARLES JOHNSON			Date of Receipt
	Mailing Address 8277 FLORAL SPRIN			09 11 2010
	City CORDOVA	State TN	Zip Code	Transaction ID: INC.A.87150
	FEC ID number of contributing federal political committee.	C	38016	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .	•		100.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate for each cate Detailed Sum		FOR LINE NUMBER: PAGE 104 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and some for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and address of any polit	tical committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COM	MII IEE (a.k.a. i	viedco Health PAC)
	Full Name (Last, First, Middle Initial) LATASHA JONES			Date of Receipt
	Mailing Address 7761 THUNDERSTOR	IE CL S		09 11 2010
	City	State Zip Code		Transaction ID: INC.A.87221
	MEMPHIS	TN 38125		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PAYER CONTRAC	CTING	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	500.00	
	Full Name (Last, First, Middle Initial) MRS REGINA JONES			Date of Receipt
	Mailing Address POST OFFICE BOX 3	8342		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.86730
	GERMANTOWN	TN 38183		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP CUST SVC		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	1500.00	
	Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
	Mailing Address 12224 MONTCALM S	TREET		M M / D D / Y Y Y Y Y O D D / 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.86944
	CARMEL	IN 46032		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
	Receipt For: Primary General	Aggregate Year-to-Date	1 1 1 1	
	Other (specify) ▼	0 0 0 0 0	975.00	
Г		1		125.00

SCHEDULE A (FEC FO ITEMIZED RECEIPTS	rm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 438 (check only one)    X   11a
or for commercial purposes, other the	an using the name and add	y not be sold or used by any perso dress of any political committee to ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions solicit contributions from such committee.  . Medco Health PAC)
Full Name (Last, First, Middle Ini MS KATHRYN JONSRUD  Mailing Address 16357 VICT	,		Date of Receipt
City PRIOR LAKE	State MN	Zip Code 55372	Transaction ID: INC.A.86790  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	SK DIK (	n CLIENT & MKT PROG STRA Year-to-Date ▼ 850.00	AT
Full Name (Last, First, Middle Ini MR HECTOR JUST Mailing Address 5329 BAYS			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.86945
TAMPA  FEC ID number of contributing federal political committee.	C	33611	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	DIR FAC	ILITY PLANNING & DESIGN	V
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Ini MR DENNIS KACKLEY			Date of Receipt
Mailing Address 32 EAST RI	VERGLEN DR		09 11 2010
City WORTHINGTON	State OH	Zip Code 43085	Transaction ID: INC.A.86867
FEC ID number of contributing federal political committee.	C	45065	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUS		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 487.50	
SUBTOTAL of Receipts This Page	(optional)		75.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may ne name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JOHN KAPIOSKI			Date of Receipt
Mailing Address 8202 MARSH GLEN			09 11 2010
City	State	Zip Code	Transaction ID: INC.A.86921
TAMPA	FL	33647	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n PHARMACY COMPLIANCE	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) MR STEVEN KARATY			Date of Receipt
Mailing Address 19 PARK AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.86578
POMPTON PLAINS	NJ	07444	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n PLANNING	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS BECKY KAUS			Date of Receipt
Mailing Address N81 W18359 TOURS	S DR		0 9 1 1 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.86770
MENOMONEE FALLS	WI	53051	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CLINICAL SVCS	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	]
			100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR WILLIAM KEELER Mailing Address 63 MOUNTAIN GLEN	DOAD		Date of Receipt
	Maining Address 63 MOON FAIN GLEN	ROAD		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87027
	RINGWOOD	NJ	07456	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNI	n CAL SPECIALIST	
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE			Date of Receipt
	Mailing Address 995 PINES TERR			09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86672
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	+ +	IANCIAL & ANALYTICAL SV	С
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼		1000.00	
C.	Full Name (Last, First, Middle Initial) MS MICHELLE KEHOE	•		Date of Receipt
	Mailing Address 26-1 FARMHOUSE L/			09 11 2010
	City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.86598
	FEC ID number of contributing		07900	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>, '</del>	ERPRISE BUSINESS INTE	<u></u>
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	,
	Other (specify)		500.00	
	SUBTOTAL of Receipts This Page (optional) .			100.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III			Date of Receipt
Mailing Address 1970 WOODLANDS PI	L		0 9 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.86858
POWELL	OH	43065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n AL MGR GROUP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR KEVIN KELLY			Date of Receipt
Mailing Address 251 POPLAR 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.86604
HACKENSACK	NJ	07601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR PETER KENNY			Date of Receipt
Mailing Address 6040 BOULEVARD E	APT 28G		0 9 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.86979
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 A	n ACCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	100.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 438 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS II	ng the name and add	dress of any political committee to	
Full Name (Last, First, Middle Initial)  MS INNA KHANIN  Mailing Address 3403 SPRINGBR	OOK DRIVE		Date of Receipt
City EDISON	State NJ	Zip Code 08820	Transaction ID: INC.A.87057  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		n CAL SPECIALIST  Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  MS DONNA KLEIN  Mailing Address 1080 FOREST CI	LIFF DRIVE		Date of Receipt  0 9 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87171
LAKEWOOD	OH	44107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER	•		Date of Receipt
Mailing Address 121 CONKLING 7	TOWN ROAD		M M / D D / Y Y Y Y Y Y O D D / 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.86991
CHESTER  FEC ID number of contributing federal political committee.	C	10918	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optio	nal)		100.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS		FOR LINE NUMBER: PAGE 110 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person of g the name and address of any political committee to so	or the purpose of soliciting contributions licit contributions from such committee.
MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL ACTION COMMITTEE (a.k.a. N	fledco Health PAC)
Full Name (Last, First, Middle Initial) KENNETH KLEPPER		Date of Receipt
Mailing Address 295 GLEN PLACE		09 11 2010
City	State Zip Code	Transaction ID: INC.A.87040
FRANKLIN LAKES	NJ 07417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES & CHIEF OPERATING OFFICER	3
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  3846.00	
Full Name (Last, First, Middle Initial) RICHARD KLUSOVSKY		Date of Receipt
Mailing Address 1016 FAIRWOOD	LANE	09 11 2010
City	State Zip Code	Transaction ID: INC.A.87199
ACWORTH	GA 30101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation AVP MANAGED CARE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS LORI KOEHNEN		Date of Receipt
Mailing Address 6920 DYLAN LAN	E	0 9 1 1 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.86832
INDEPENDENCE	MN 55359	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR GENERIC STRAT & CUST DV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)	242.30

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for ea	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 111 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and address of a	ny political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR BRADFORD KOGEN  Mailing Address 555 FORBUSH ST	REET		Date of Receipt
City BOONTON FEC ID number of contributing	NJ 070	Code 05	Transaction ID: INC.A.86982  Amount of Each Receipt this Period
Receipt For:  Primary  Other (specify)	Occupation SR DIR CLIENT Aggregate Year-to-l		25.00
Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI Mailing Address 920 CLARK STRE		0 0 0 0 0	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BOWLING GREEN FEC ID number of contributing federal political committee.	State Zip of OH 434	Code 02	Transaction ID: INC.A.86638  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR NATL ACCT Aggregate Year-to-I		
Full Name (Last, First, Middle Initial) MS ANNE KRAFT Mailing Address 28 ROSEMILT PLA	ACE		Date of Receipt
City  MORRISTOWN  FEC ID number of contributing federal political committee.	State Zip 0 NJ 079	Code 60	Transaction ID: INC.A.87128  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS		EGMENT SOLUTION	ıs
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-I	500.00	
SUBTOTAL of Receipts This Page (option	al)		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 1		
A 0	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements made e name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions	
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)	
۱.	Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY Mailing Address 143 DEERFIELD TEF	DACE		Date of Receipt	
	Walling Address   143 DEERFIELD   EF	NACE		09 / 11 / 2010	
	City	State	Zip Code	Transaction ID: INC.A.86681	
	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	Occupatio EXEC DI	n IR PRODUCT		
	Receipt For:	Aggregate	e Year-to-Date ▼	_	
	Primary General Other (specify) ▼		450.00		
_	Full Name (Last, First, Middle Initial) MR ALEXANDER KRYNICKI	1		Date of Receipt	
	Mailing Address 60 BEECH ROAD			09 11 2010	
	City	State	Zip Code	Transaction ID: INC.A.86580	
	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	_ '	TECHNOLOGY		
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	-	
	Other (specify)	0 0	500.00		
_	Full Name (Last, First, Middle Initial) MS BARBARA KRZAK	•		Date of Receipt	
	Mailing Address 495 ISLAND WAY			0 9 1 1 2 0 1 0	
	City	State	Zip Code	Transaction ID: INC.A.86898	
	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		TECHNOLOGY		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		1100.00		
	SUBTOTAL of Receipts This Page (optional) .	1		105.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any personderss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)  MR MICHAEL KRZAN  Mailing Address 2735 YORK RD			Date of Receipt
				09 11 2010
	City COLUMBUS	State OH	Zip Code 43221	Transaction ID: INC.A.86959  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP ME	n MBER SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2310.00	
- В.	Full Name (Last, First, Middle Initial) MR DEEPAK KUMAR			Date of Receipt
	Mailing Address 50 MANCHESTER CT	•		0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86841
	KINNELON FEC ID number of contributing federal political committee.	NJ C	07405	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- C.	Full Name (Last, First, Middle Initial) MR MANOJ KUMAR			Date of Receipt
	Mailing Address 7 SUNRISE WAY			0 9 1 1 1 2 0 1 0
	City TOWACO	State	Zip Code	Transaction ID: INC.A.86886
	FEC ID number of contributing federal political committee.	NJ C	07082	Amount of Each Receipt this Period  30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio BUSINES	n SS PROCESS CHAMPION	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
	SUBTOTAL of Receipts This Page (optional)			255.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	he name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MARK LANDY Mailing Address 18 LADIK PL  City MONTVALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07645 n DELIVERY SYSTEM e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1
Full Name (Last, First, Middle Initial)  JAMES LANGLEY  Mailing Address 10921 MAIN RANGE  City  LITTLETON  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify)	State CO C Occupatio SVP FIN	Zip Code 80127 n ANCIAL ADMIN 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
Full Name (Last, First, Middle Initial)  MR EDWARD LAPUSHCHIK  Mailing Address 2 OLD LANE  City  MONTVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	<del></del>	Zip Code 07045 n CAL SPECIALIST 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
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		•	150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR MARCELO LAROSA  Mailing Address 162 HILLTOP ROA	AD		Date of Receipt  0 9 1 1 2 0 1 0
City  MONROE  FEC ID number of contributing	State NY	Zip Code 10950	Transaction ID: INC.A.86605  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		CLIENT SVC DELIVERY  Year-to-Date	25.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate	500.00	
MS CYNTHIA LAUBACHER  Mailing Address 1100 KIMBERLY C	COURT		Date of Receipt  0 9 1 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.86847
ROSEVILLE FEC ID number of contributing federal political committee.	CA	95661	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS		OVERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) MICHELE LAW			Date of Receipt
Mailing Address 600 KINGFRED DI	K		09 11 2010
City	State	Zip Code	Transaction ID: INC.A.87202
NORTH HUNTINGDON  FEC ID number of contributing federal political committee.	C	15642	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR TRC		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (options	al)		150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers e name and address of any political committee to	
` ′	POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) PAUL LEAPO Mailing Address 1 CHRISTIAN DRIVE		Date of Receipt
City	State Zip Code	0 9 1 1 2 0 1 0  Transaction ID: INC.A.87037
EAST BRUNSWICK	NJ 08816	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	26.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	
Full Name (Last, First, Middle Initial) JOSEPH LENZ		Date of Receipt
Mailing Address 1735 LINKENHOLT C		09 / 11 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.87077
COLLIERVILLE	TN 38017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP PERFORMANCE STRATEGY	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	_
Other (specify)	1000.00	
Full Name (Last, First, Middle Initial) EMMA LEVIN		Date of Receipt
Mailing Address 18 SALEM RD		09 / 11 / 2010
City <u>EAST BRUNSWICK</u>	State Zip Code  NJ 08816	Transaction ID: INC.A.87104  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) .		101.00

ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE   117/438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DORIAN LO			Date of Receipt
Mailing Address 202 MORRIS AVE	NUE		0 9 1 1 2 0 1 0
City MOUNTAIN LAKES	State NJ	Zip Code 07046	Transaction ID: INC.A.86850  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07040	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIN	n ICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR ROBERT LONG	<u> </u>		Date of Receipt
Mailing Address 18 HARLIND TERM	RACE		M M / D D / Y Y Y Y Y O D D / 2 0 1 0
City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.86835  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07410	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	<u> </u>	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) DAVID LOSCHINSKEY			Date of Receipt
Mailing Address 4500 MT GILLESP	PIE DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LAKELAND	State TN	Zip Code 38002	Transaction ID: INC.A.87206
FEC ID number of contributing federal political committee.	C	30002	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP BIAC	١	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (options			150.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	(X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	not be sold or used by any persolress 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 IN	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR BRICE LOVE			Date of Receipt
Mailing Address 2390 BRANDON I	RD		0 9 1 1 2 0 1 0
City COLUMBUS	State OH	Zip Code 43221	Transaction ID: INC.A.86794  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	TOLL	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 1		
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
Mailing Address 1066 WEST GRO	VE CT		M M / D D / Y Y Y Y O D D / 2 0 1 0
City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.86692  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10011	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 1170.00	
Full Name (Last, First, Middle Initial) MS SHARON MACCOY			Date of Receipt
Mailing Address 9248 TALWAY CI	R		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BOYNTON BEACH	State FL	Zip Code 33472	Transaction ID: INC.A.86836
FEC ID number of contributing federal political committee.	C	33472	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 475.00	
SUBTOTAL of Receipts This Page (option	nal)		67.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	he name and addr	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS VERONA MACMAHON Mailing Address 1504 WEST CULLO UNIT G City CHICAGO FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	M AVE State IL C Occupation	Zip Code 60613 CCT MGMT OPS	Date of Receipt  0 9 1 1 2 0 1 0  Transaction ID: INC.A.87006  Amount of Each Receipt this Period  25.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR KENNETH MALLEY Mailing Address 764 W. SADDLE RIV	VER ROAD		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.86732
HO HO KUS  FEC ID number of contributing federal political committee.	C	07423	Amount of Each Receipt this Period  192.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GE	ENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 2420.00	
Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO			Date of Receipt
Mailing Address 33 HICKORY TAVE	RN RD		0 9 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.86568
GILLETTE	NJ	07933	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAN	ICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			267.00

SCHEDULE A (FEC Form	138)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Repo or for commercial purposes, other than	rts and Statements may using the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS			
Full Name (Last, First, Middle Initial) JOE MARABITO			Date of Receipt
Mailing Address 637 WYCKOF	AVENUE		0 9 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87127
WYCKOFF  FEC ID number of contributing federal political committee.	C	07481	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CONS	SUMER DRIVEN MKTS	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS ILENE MARCUS	I		Date of Receipt
Mailing Address 97 BLUEBERF	Y DR		09 11 2010
City WOODCLIFF LAKE DR	State NJ	Zip Code 07675	Transaction ID: INC.A.86909
FEC ID number of contributing federal political committee.	C	07075	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR JOSEPH MARINELLI			Date of Receipt
Mailing Address 351 SOUND B	EACH AVENUE		09 11 2010
City OLD GREENWICH	State CT	Zip Code	Transaction ID: INC.A.86677
FEC ID number of contributing federal political committee.	C	06870	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR N	MEDICARE OPS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (or	tional)		75.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 438 (check only one)    X
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	o solicit contributions from such committee.
∡.	Full Name (Last, First, Middle Initial) LORI MARINO		(a.i.e.	Date of Receipt
	Mailing Address 31 UNDERWOOD DR	IVE		09 11 2010
	City WEST ORANGE	State NJ	Zip Code 07052	Transaction ID: INC.A.87124  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST G	on ENERAL COUNSEL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
3.	Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL-IGUNBOR Mailing Address W144 N7150 TERRAC	E DRIVE		Date of Receipt
			7'- 0-1-	09 11 2010
	City MENOMONEE FALLS	State WI	Zip Code 53051	Transaction ID: INC.A.86766  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	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date  1000.00	
- ; <u>.</u>	Full Name (Last, First, Middle Initial) MR JOSEPH MARSIGLIANO Mailing Address 11 ECHO HILL ROAD			Date of Receipt
				09 11 2010
	City MONTVALE	State NJ	Zip Code 07645	Transaction ID: INC.A.87126  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	TECHNOLOGY	7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	I		125.00
ļ	TOTAL This Period (last page this line number	only)		

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 commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  MEDOC HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medoc Health PAC)  Full Name (Last, First, Middle Initial)  SHELLY MARTN  Mailing Address 9536 DOE MEADOW DR  City State Zip Code  GERMANTOWN TN 38139  FEC ID number of contributing federal political committee.  C Primary General Other (specify) ▼ State Zip Code  Transaction ID: INC.A.87212  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C Primary General Other (specify) ▼ State Zip Code  Transaction ID: INC.A.86712  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C State Zip Code  Transaction ID: INC.A.86712  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C State Zip Code  Transaction ID: INC.A.8712  Amount of Each Receipt this Period  FULL Name (Last, First, Middle Initial)  MR TODO MARTIN  Mailing Address 11825 SHEPPARDS CROSSING  City State Zip Code  Transaction ID: INC.A.8712  Amount of Each Receipt this Period  FULL Name (Last, First, Middle Initial)  MR WILLIAM MARTIN  Mailing Address 2601 FOX HLL CIRCLE EAST  City State Zip Code  GERMANTOWN TN 38139  FEC ID number of contributing  FULL Name (Last, First, Middle Initial)  MR WILLIAM MARTIN  Mailing Address 2601 FOX HLL CIRCLE EAST  City State Zip Code  GROUP VP BUS DEV  Receipt For:  QERMANTOWN TN 38139  FEC ID number of contributing  General Other (specify) ▼ 1000.00  Date of Receipt  Amount of Each Receipt this Period  FULL Name (Last, First, Middle Initial)  MR TODO MARTIN  Mailing Address 2601 FOX HLL CIRCLE EAST  City State Zip Code  GROUP VP BUS DEV  Amount of Each Receipt this Period  FULL Name (Last, First, Middle Initial)  Amount of Each	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
SHELLY MARTIN  Mailing Address 9536 DOE MEADOW DR  City State Zip Code GERMANTOWN TN 38139  FULL Name (I Early Receipt The State St	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR TODD MARTIN  Mailing Address 11825 SHEPPARDS CROSSING  City State Zip Code MD 21029  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Full Name (Last, First, Middle Initial) MR WILLIAM MARTIN  Mailing Address 2601 FOX HLL CIRCLE EAST  City State Zip Code MD 21029  Full Name (Last, First, Middle Initial) MR WILLIAM MARTIN  Mailing Address 2601 FOX HLL CIRCLE EAST  City State Zip Code GERMANTOWN TN 38139  FEC ID number of contributing federal political committee.  C Date of Receipt  Transaction ID: INC.A.86712  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.87132  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General  Date of Receipt  Transaction ID: INC.A.87132  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Occupation GROUP VP BUS DEV  Receipt For: Primary General	SHELLY MARTIN  Mailing Address 9536 DOE MEADOW  City  GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General	State Zip Code TN 38139  C  Occupation DIR HR  Aggregate Year-to-Date	Transaction ID: INC.A.87212  Amount of Each Receipt this Period
Tull Name (Last, First, Middle Initial)  MR WILLIAM MARTIN  Mailing Address 2601 FOX HLL CIRCLE EAST  City  GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary  General  Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Full Name (Last, First, Middle Initial) MR TODD MARTIN Mailing Address 11825 SHEPPARDS C  City CLARKSVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State Zip Code MD 21029  C Occupation SVP & GENERAL MGR	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ACCREDO HEALTH GROUP  GROUP VP BUS DEV  Receipt For:  Primary  General  Aggregate Year-to-Date  1000.00	Other (specify)  Full Name (Last, First, Middle Initial) MR WILLIAM MARTIN Mailing Address 2601 FOX HLL CIRCL City GERMANTOWN FEC ID number of contributing federal political committee.	E EAST  State Zip Code TN 38139	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUPTOTAL of Penginta This Page (entional)	Receipt For:  Primary General	GROUP VP BUS DEV  Aggregate Year-to-Date ▼	207.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) MR EDWARD MARTINEZ Mailing Address 35 SALTER PLACE City MAPLEWOOD	State NJ	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		PRODUCT MGMT  Property Year-to-Date ▼  500.00	
	Full Name (Last, First, Middle Initial) MR JEFFREY MAY Mailing Address 137 WASHINGTON A	VE		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.86946
	FEC ID number of contributing federal political committee.	C	07642	Amount of Each Receipt this Period  192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PH	n ARMA STRAT & SOLUTION	S
	Receipt For: Primary General Other (specify)	1 '	e Year-to-Date ▼ 3846.00	
	Full Name (Last, First, Middle Initial) MR TERENCE MAYTIN Mailing Address 496 FRANKLIN AVE			Date of Receipt  0 9 1 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86706
	WYCKOFF  FEC ID number of contributing federal political committee.	C	07481	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-CC	n NM STRATEGY & DELIVERY	
	Receipt For:  Primary General  Other (specify) ▼	<del>, '</del>	e Year-to-Date ▼ 500.00	
Г	SUBTOTAL of Receipts This Page (optional)			242.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	te separate schedule(s) each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 124 / 438 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and address	of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE  Mailing Address 19 FARMINGTON CO  City RAMSEY  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General	State Z NJ C	Zip Code 07446  ND MARKETING to-Date ▼	Date of Receipt  0 9 1 1 2 0 1 0  Transaction ID: INC.A.86743  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) THOMAS MCCANN Mailing Address 9600 DOVE SPRING ( City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Z	Zip Code 38139	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.87214  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MS SHANNON MCCRUDDEN Mailing Address 8309 SANCTUARY BL  City RIVERDALE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Z	to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y  0 9 1 1 1 2 0 1 0  Transaction ID: INC.A.87062  Amount of Each Receipt this Period  25.00
Other (specify)   SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number			125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 125 / 438   (check only one)     X
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD			Date of Receipt
Mailing Address 0-45 27TH ST			09 11 2010
City FAIR LAWN	State NJ	Zip Code	Transaction ID: INC.A.86889
FEC ID number of contributing federal political committee.	C	07410	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH	I		Date of Receipt
Mailing Address 87 ROSELAWN RI	)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HIGHLAND MILLS	State NY	Zip Code 10930	Transaction ID: INC.A.86846  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	192.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST GE	n ENERAL COUNSEL	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3840.00	
Full Name (Last, First, Middle Initial) MR WILLIAM MCLAUGHLIN			Date of Receipt
Mailing Address 8 BATES CIRCLE			09 11 2010
City FLORIDA	State NY	Zip Code 10921	Transaction ID: INC.A.87017
FEC ID number of contributing federal political committee.	C	10921	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n FECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional			242.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 438 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and address	s of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA Mailing Address 112 GREEN TERRAC  City WEST MILFORD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		Zip Code 07480 ESS OPS	Date of Receipt  0 9 1 1 2 0 1 0  Transaction ID: INC.A.86998  Amount of Each Receipt this Period  192.31
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR EDWARD MCNEILEY  Mailing Address 2623 KENCHESTER	LOOP	3846.20	Date of Receipt
City WESLEY CHAPEL	State FL	Zip Code 33543	Transaction ID: INC.A.86740  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation DIR PHARM Aggregate Yea		12.50
Full Name (Last, First, Middle Initial) CRAIG MEARS Mailing Address 106 MEADOWLAKE			Date of Receipt
City HENDERSONVILLE	State TN	Zip Code 37075	Transaction ID: INC.A.87185  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP	Occupation PRESIDENT		50.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea		
SUBTOTAL of Receipts This Page (optional)	1		254.81

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS WENDY MELLO  Mailing Address 5147 BLUE SPRUCE  City YPSILANTI  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State MI  C  Occupation DIR MKT	TING & STRATEGIC ANAL  2 Year-to-Date ▼  360.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86647  Amount of Each Receipt this Period  20.00
Full Name (Last, First, Middle Initial) MS LAURA MENVILLE Mailing Address 23 UNION HILL RD  City MORRIS PLAINS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07950 n :HNOLOGY 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
Full Name (Last, First, Middle Initial) MS BARBARA MENZEL  Mailing Address 921 AMARYLLIS AVE  City ORADELL  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 E	Zip Code 07649 n BUS PLANNING & ADMIN e Year-to-Date ▼	Date of Receipt  M M M / D D D 2010  Transaction ID: INC.A.86629  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)			70.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any persename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DANETTE MEREDITH  Mailing Address 600 W 2ND AVE  City DERRY  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code PA 15627  C  Occupation AVP SALES  Aggregate Year-to-Date   500.00	Date of Receipt  M M M D D D D 2 0 1 0  Transaction ID: INC.A.87176  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR JEFFREY MESAROS Mailing Address 10565 96TH ST NOR  City LARGO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	TH  State Zip Code FL 33773  C  Occupation ATTORNEY  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.86818  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR DAN MILKENS Mailing Address 826 DOWNING STRE  City NORTHBROOK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code IL 60062  C  Occupation VP SALES  Aggregate Year-to-Date   500.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional) .		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for e	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 129 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and address of	any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DAVID MILLER  Mailing Address 7 CLOVER LANE  City RANDOLPH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MRS KAREN MILLER Mailing Address 34 MACKENZIE LANI  City DENVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip	Code 834 ERNAL AUDIT	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) PAMELA MILLER Mailing Address 158 SUMMIT AVENU City HACKENSACK FEC ID number of contributing federal political committee.	State Zip	-Date ▼ 1000.00  Code 601	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary Other (specify)	Occupation	COMMUNITY INVES -Date ▼ 1100.00	<u>T</u>
SUBTOTAL of Receipts This Page (optional) .	•		155.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) MR 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)		Zip Code 07405 on TECHNOLOGY 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
_ В.	Full Name (Last, First, Middle Initial) MR BHUPESH MISTRY Mailing Address 92 REDSTONE DR  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 on CAL SPECIALIST e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86587  Amount of Each Receipt this Period  25.00
 C.	Full Name (Last, First, Middle Initial) MR DAVID MITCHELL  Mailing Address 222 WEST 14TH STRE APT. 4B  City NEW YORK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NY  C Occupation VP MKT	Zip Code 10011 on ING & PRODUCT DEV 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
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		·	100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 438 (check only one)    X
\	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)  MONALISA MOHANTY	OLITIOAL 7	TOTION COMMITTEE (a.n.e	Date of Receipt
۱.	Mailing Address 1574 WHITMAR PLAC	E		0 9 1 1 2 0 1 0
	City MEMPHIS	State TN	Zip Code	Transaction ID: INC.A.87159
	FEC ID number of contributing federal political committee.	C	38120	Amount of Each Receipt this Period 25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR MAF		
	Receipt For:  Primary  General  Other (specify)	Aggregate	Year-to-Date ▼ 225.00	
- 3.	Full Name (Last, First, Middle Initial) MS JULIANA MOLEK Mailing Address 8620 LAKE RILEY DR	Date of Receipt		
				09 11 2010
	City CHANHASSEN	State MN	Zip Code 55317	Transaction ID: INC.A.86721  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR S	n SPECIAL MARKETS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) ROBERT MOLONEY  Mailing Address 24 ABBINGTON TERF	RACE		Date of Receipt
	City	State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.87092
	<u>GLEN ROCK</u>	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		CAL SPECIALIST	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			100.00

Any information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any provided in the name	political committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR ERICK MONCAYO  Mailing Address 404 HAMILTON AVE  City State Zip Cod GLEN ROCK NJ 07452  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Other (specify)  Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE Mailing Address 1320 BRONCO CIR  City State Zip Cod WARRINGTON PA 18976  FEC ID number of contributing federal political committee.  Name of Employer MEDCO LIEALTH SOLUTIONS  Name of Employer MEDCO LIEALTH SOLUTIONS  Occupation	Date of Receipt
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE Mailing Address 1320 BRONCO CIR  City State Zip Cod WARRINGTON PA 18976  FEC ID number of contributing federal political committee.  Name of Employer MEDICO LIE ATTHE SOLUTIONS  Occupation	0 9
MR PETER MONKHOUSE  Mailing Address 1320 BRONCO CIR  City State Zip Cod  WARRINGTON PA 18976  FEC ID number of contributing federal political committee.  Name of Employer Occupation  MEDICO LIE ALTERNAS  Occupation	500.00
WARRINGTON PA 18976  FEC ID number of contributing federal political committee.  Name of Employer MEDICO LIE ALTERNA Occupation	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
FEC ID number of contributing federal political committee.  Name of Employer MEDICO HEALTH SOLUTIONS  Occupation	Transaction is
Name of Employer MEDCO HEALTH SOLUTIONS OCCUPATION	Amount of Each Receipt this Period  25.00
""== a a · · · · · · a a a · · · · · · · ·	nev
Receipt For: Primary Other (specify)	
Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY Mailing Address 86 WELLINGTON AVENUE	Date of Receipt
City State Zip Cod	0 9 1 1 2 0 1 0  Transaction ID: INC.A.86556
SHORT HILLS NJ 07078	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	192.00
Name of Employer MEDCO HEALTH SOLUTIONS  Occupation GENL C-SEC-SVP	PHARM STRAT SQL
Receipt For:  Primary  General  Other (specify) ▼  Aggregate Year-to-Date	
SUBTOTAL of Receipts This Page (optional)	3840.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	(*)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 133 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may ig the name and addi	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS THERESA MORMILE			Date of Receipt
Mailing Address 59 VALLEY VIEW	TER		09 11 2010
City	State	Zip Code	Transaction ID: INC.A.86947
MONTVALE  FEC ID number of contributing federal political committee.	C	07645	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAN		
Receipt For:  Primary  General  Other (specify)	<del> </del>	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR CRAIG MORRIS			Date of Receipt
Mailing Address N 49 W 25648 MCKERROW DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PEWAUKEE	State W1	Zip Code	Transaction ID: INC.A.86765
FEC ID number of contributing federal political committee.	C	53072	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIF	R CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) JACQUELINE MORRIS			Date of Receipt
Mailing Address 750 COLUMBUS APT 06S	AVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NEW YORK	State	Zip Code	Transaction ID: INC.A.87139
FEC ID number of contributing federal political committee.	C	10025	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR INT'L	BUSINESS DEV	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option			125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	) <b>^</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 134 / 438   (check only one)
Any information copied from such Reports or for commercial purposes, other than usin	and Statements may	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 IN	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RICHARD MOUNTJOY			Date of Receipt
Mailing Address 2 STONEBRIDGE	RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.86992  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	. ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) MR PHILLIP MUELLER			Date of Receipt
Mailing Address 16329 RIVERBIR	CH DRIVE		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MARYSVILLE	State OH	Zip Code 43040	Transaction ID: INC.A.86819
FEC ID number of contributing federal political committee.	C	+50+0	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	IICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MR ROBERT MULLER			Date of Receipt
Mailing Address 69 FERN PLACE			M M / D D / Y Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PARAMUS	State NJ	Zip Code 07652	Transaction ID: INC.A.86964
FEC ID number of contributing federal political committee.	C	1 1 1 1 1	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP HLTH	n I BUS CLIENT ENROLLMN	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option			95.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 135 / 438 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and address	of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS KATHLEEN MURPHY Mailing Address 206 TARRYTOWN DF  City RICHMOND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Z		Date of Receipt  M M M / D D M 2010  Transaction ID: INC.A.86969  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS 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)			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR ANDREW NANICK  Mailing Address 220 LAUREL BAY DR  City MURRELLS INLET  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State 2		Date of Receipt  M M M / D D D 2010  Transaction ID: INC.A.86641  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)			100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17			
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma le name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)			
Α.	Full Name (Last, First, Middle Initial) JANARDHAN NARAYANAN						
	Mailing Address 32 BLACKSTONE DF			09 / 11 / 2010			
	City PRINCETON	State NJ	Zip Code 08540	Transaction ID: INC.A.87136  Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		29.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on MARKET STRATEGY				
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 630.00				
В.	Full Name (Last, First, Middle Initial) MS BARBARA NEAVERTH Mailing Address PO BOX 523			Date of Receipt			
	City	State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.86612			
	SUGAR LOAF	NY	10981	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on BUSINESS REQUIREMENT	S			
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00				
C.	Full Name (Last, First, Middle Initial) BRIAN NEMIROFF			Date of Receipt			
	Mailing Address 335 VILLAGE PLACE	Ē		0 9 1 1 2 0 1 0			
	City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.87137  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 ORG					
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 300.00				
	SUBTOTAL of Receipts This Page (optional)	1		79.00			
	TOTAL This Period (last page this line numbe	er only)	·				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to some committee to some committee to some committee to some committee to some committee (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) CHRISTIAN NICKERSON Mailing Address 20 MELVILLE ROA  City PRINCETON JCT  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 08550  C  Occupation SR DIR ENTERPRISE BUS INTELLIG Aggregate 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
Other (specify) ▼  Full Name (Last, First, Middle Initial) MR MICHAEL NICODEMO  Mailing Address 407 MEER AVE  City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
WYCKOFF  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	Transaction ID: INC.A.86997  Amount of Each Receipt this Period  50.00
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 950.00	
MS EVELYN NIXON  Mailing Address 10011 BELLONA C	ET	Date of Receipt  0 9 1 1 2 0 1 0
City HENRICO FEC ID number of contributing	State Zip Code VA 23233	Transaction ID: INC.A.86970  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIP ACCT MCMT ORS	25.00
Receipt For:  Primary General  Other (specify) ▼	DIR ACCT MGMT OPS  Aggregate Year-to-Date ▼  500.00	
SUBTOTAL of Receipts This Page (optional	)	100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) MS ARLENE NOLAN Mailing Address 319 BOGERT AVENUE  City RIDGEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupatio VP FINA		Date of Receipt  M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86679  Amount of Each Receipt this Period  50.00
- В.	Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN Mailing Address 45 DAVIS ROAD  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  on NICAL THERAPEUTICS e Year-to-Date ▼ 760.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86769  Amount of Each Receipt this Period  38.00
- C.	Full Name (Last, First, Middle Initial) MS JANINE NOWATZKY Mailing Address 24 CHEROKEE TRAIL  City OAKLAND  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 I	Zip Code 07436 on MARKET STRATEGY 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
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		·	118.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE   139 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) DENISE O'CALLAGHAN			Date of Receipt
Mailing Address 4 HIGHLAND AVE P.O. BOX 408			09 11 2010
City	State	Zip Code	Transaction ID: INC.A.87129
PEAPACK  FEC ID number of contributing federal political committee.	NJ C	07977	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP OPS	n	
Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR ROBERT O'CONNELL			Date of Receipt
Mailing Address 12001 PEONY CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TAMPA	State FL	Zip Code 33635	Transaction ID: INC.A.86674  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR SEC		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) SUSAN O'CONNOR			Date of Receipt
Mailing Address 5 HICKORY DRIVE			0 9 1 1 2 0 1 0
City NANUET	State NY	Zip Code	Transaction ID: INC.A.87141
FEC ID number of contributing federal political committee.	C	10954	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n MEDICAL	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional			100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
<u></u>	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER Mailing Address 6 PARK DR SOUTH			Date of Receipt
				09 11 2010
	City RYE	State NY	Zip Code 10580	Transaction ID: INC.A.86980
	FEC ID number of contributing federal political committee.	C	10300	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- В.	Full Name (Last, First, Middle Initial) MR SUNNY OGBONDA			Date of Receipt
	Mailing Address 79 LAUREL WOOD (	09 11 2010		
	City	State	Zip Code	Transaction ID: INC.A.86590
	ROCKAWAY TOWNSHIP	NJ	07866	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	on SINESS REQUIREMENTS	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		500.00	
с. С.	Full Name (Last, First, Middle Initial) MR MELVIN OHL			Date of Receipt
	Mailing Address 274 E FRANKLIN TP	KE		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86918
	RIDGEWOOD  FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	on CUREMENT & INVENTORY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional) .			125.00
	TOTAL This Period (last page this line numbe		<u> </u>	

any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for 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)  MB BRYAN OLENIK  Mailing Address 653 E. DEVON DRIVE  City  State  Zip Code  Aggregate Year-to-Date  PEC ID number of contributing federal political committee.  Receipt For:  Primary  General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MB STATE TO Committee.  City  State  Zip Code  NJ 07508  FULL Name (Last, First, Middle Initial)  MB SUE CUVER  Mailing Address 11 LEE DRIVE  City  State  Zip Code  NJ 07508  FEC ID number of contributing federal political committee.  City  State  Zip Code  NJ 07508  FEC ID number of contributing federal political committee.  City  State  Zip Code  NJ 07508  Annount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State  Zip Code  NJ 07508  Annount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State  Zip Code  NJ 07508  Annount of Each Receipt this Period  Date of Receipt  Site City  Date of Receipt  Site City  Site City  Site City  Site City  Site City  Date of Receipt  Site City  Site	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 438 (check only one)    X   11a
MR BRYAN OLENIK  Mailing Address 653 E. DEVON DRIVE  City State Zip Code GILBERT AZ 85296  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  DIR PHARM PRACTICE  Receipt For:	or for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
GILBERT  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:    Primary   General   Aggregate Year-to-Date ▼	MR BRYAN OLENIK  Mailing Address 653 E. DEVON DRIVE			0 9 1 1 1 Y Y Y Y Y
Receipt For:	GILBERT FEC ID number of contributing	AZ	•	Amount of Each Receipt this Period
Mailing Address 11 LEE DRIVE  City State Zip Code NJ 07508  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  State Zip Code NJ 07508  Transaction ID: INC.A.86928  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Date of Receipt  M M M J 1 1 2 0 1 0  Transaction ID: INC.A.86928  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Date of Receipt  Transaction ID: INC.A.86928  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.86928  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.86928  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  NATI ACCT EXEC  Receipt For: Primary General  Date of Receipt  Transaction ID: INC.A.86928  Amount of Each Receipt this Period  C 25.00	Receipt For: Primary General	DIR PHA	RM PRACTICE Year-to-Date ▼	
NORTH HALEDON NJ 07508  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS CLAUDINE OLSEN  Mailing Address 4 HIGHGATE CT  City State Zip Code NY 10901  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Occupation EXEC DIR TECHNOLOGY  Aggregate Year-to-Date ▼  Transaction ID: INC.A.86973  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.86973  Amount of Each Receipt this Period  Date of Receipt  M M M D D D D D D D D D D D D D D D D	MRS SUE OLIVER			M M / D D / Y Y Y Y
Receipt For:    Primary   General   Other (specify) ▼	NORTH HALEDON FEC ID number of contributing	NJ	·	Amount of Each Receipt this Period
MS CLAUDINE OLSEN  Mailing Address 4 HIGHGATE CT  City State Zip Code SUFFERN  NY 10901  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Date of Receipt  M M M O D D O D O D D O D D O D D O D D O D D O D D O D D O D D O D D O D D O D D O D D O D D O D D O D D O D D O D	Receipt For: Primary General	EXEC DI	R TECHNOLOGY • Year-to-Date ▼	
City       State       Zip Code       Transaction ID: INC.A.86973         SUFFERN       NY       10901       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       25.00         Name of Employer MEDCO HEALTH SOLUTIONS       Occupation NATL ACCT EXEC         Receipt For:       Aggregate Year-to-Date       ▼	MS CLAUDINE OLSEN			M M / D D / Y Y Y Y
MEDCO HEALTH SOLUTIONS  NATL ACCT EXEC  Receipt For:  Primary  General  FOO OO	SUFFERN FEC ID number of contributing	NY	·	Transaction ID: INC.A.86973  Amount of Each Receipt this Period
E00.00   I	Receipt For:	NATL AC	CCT EXEC	
SUPTOTAL of Possints This Page (entional)			500.00	07.50

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PA (check only one)  X 11a 11b 11c 13 14 15	AGE 142 / 438
or for co	ormation copied from such Reports and Sommercial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting c	ontributions
\	ME OF COMMITTEE (In Full) DCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
MS I	Name (Last, First, Middle Initial) PATRICE OLSON ing Address 9933 TOLEDO DRIVE	NORTH		Date of Receipt	2010
City BR0	OOKLYN PARK	State MN	Zip Code 55443	Transaction ID: INC.A.  Amount of Each Receipt	86989
	ID number of contributing ral political committee.	C			25.00
	ne of Employer OCO HEALTH SOLUTIONS	. '	ACCT MGMT		
Rece	eipt For:	Aggregate	e Year-to-Date ▼ 250.00		
. MS	Name (Last, First, Middle Initial) CYNTHIA O'NEILL ing Address 69 SUMMIT AVE			Date of Receipt	/
	ING MODIOSS 09 SOMMIN AVE			09 11	2010
City MO	NTVALE	State NJ	Zip Code 07645	Transaction ID: INC.A.  Amount of Each Receipt	
FEC	ID number of contributing ral political committee.	C	07043	Amount of Each Necept	25.00
Nam MEI	ne of Employer DCO HEALTH SOLUTIONS	Occupatio VP OPS	n & INSTALLATION SVCS		
Rece	eipt For:	Aggregate	e Year-to-Date ▼ 500.00		
	Name (Last, First, Middle Initial) XANDER ONIK			Date of Receipt	
Maili	ing Address 1 SCHINDLER CT			0 9 1 1 1	2010
City		State	Zip Code	Transaction ID: INC.A.	
FEC	PER SADDLE RIVER  ID number of contributing ral political committee.	C	07458	Amount of Each Receipt	this Period 25.00
Nam MEI	ne of Employer OCO HEALTH SOLUTIONS	Occupatio DIR TEC	n HNOLOGY		
Reco	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00		
SUBTO	OTAL of Receipts This Page (optional)	1			75.00
TOTAL	L This Period (last page this line number	only)			

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 143 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS NATALYA ONIK			Date of Receipt
Mailing Address 1 SCHINDLER CT			0 9 1 1 2 0 1 0
City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.86804  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07400	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BIAC	SYSTEMS SOLUTIONS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR KIPP OTTLEY			Date of Receipt
Mailing Address 672 PETWORTH (	СТ		M M / D D / Y Y Y Y O D D / 2010
City POWELL	State OH	Zip Code 43065	Transaction ID: INC.A.86729  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	+5000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HI T	n H CARE OPS	
Receipt For: Primary General Other (specify)	<del>-</del> -	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS DAWN PAGANO			Date of Receipt
Mailing Address 185 PASCACK RO	)AD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PARK RIDGE	State NJ	Zip Code 07656	Transaction ID: INC.A.86906  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07030	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP		
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 950.00	
SUBTOTAL of Receipts This Page (options	al)		100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR RICHARD PAGANO			Date of Receipt
	Mailing Address 185 PASCACK RD			0 9 1 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State NJ	Zip Code	Transaction ID: INC.A.86899
	PARK RIDGE FEC ID number of contributing	C	07656	Amount of Each Receipt this Period  25.00
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS REQUIREMENTS	
	Receipt For:	_'	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE			Date of Receipt
	Mailing Address 12 MILLBROOK COUR	RT		0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86792
	LIVINGSTON	NJ	07039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP RETI	n REE SOLUTIONS MKTG	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
C.	Full Name (Last, First, Middle Initial) MR RICHARD PALOMBO			Date of Receipt
	Mailing Address 19 E. HOLLYWOOD L	ANE		0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87035
	BEESLEY'S POINT FEC ID number of contributing	NJ	08223	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n PHARMACY REGULATORY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	SUBTOTAL of Receipts This Page (optional)	l		100.00
	SUBTUTAL OF Neceptis This Page (optional)		······································	
	TOTAL This Period (last page this line number	only)	<b>&gt;</b>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 438 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JUN PARK Mailing Address 2843 HONEYSUCKLE  City HILLIARD FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State OH C Occupatio BUSINE	Zip Code 43026 n SS PROCESS CHAMPION e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.87073  Amount of Each Receipt this Period  12.50
Full Name (Last, First, Middle Initial) MS GIRA PATEL Mailing Address 5 FOXHILL RUN  City MONMOUTH JUNCTION  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	_ '	Zip Code 08852	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR JAY PATEL Mailing Address 14 BROWNSTONE TI  City HAWTHORNE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupatio DIR TEC	Zip Code 07506 n HNOLOGY e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.87069  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		•	62.50

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	) 	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 146 / 438   (check only one)
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS II	NC. POLITICAL A	CTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MATTHEW PATELLA			Date of Receipt
Mailing Address 30 TAM O SHAN	TER DRIVE		M M / D D / 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.86614  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	ACCT EXEC	
Receipt For:  Primary  General  Other (specify)		Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS			Date of Receipt
Mailing Address 2780 FOLKSTON	0 9 1 1 1 2 0 1 0		
City COLUMBUS	State OH	Zip Code 43220	Transaction ID: INC.A.86650  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	TOLEO	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	7
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 975.00	
Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI			Date of Receipt
Mailing Address 211 WILTSIE CO	URT		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.86748
FEC ID number of contributing federal political committee.	C	07401	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optio	nal)		105.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MERRI PENDERGRASS, MD  Mailing Address 3201 QUEENSBURY  City COLLEYVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State TX  C  Occupation VP NATIO	ONAL PRACTICE LEADER  Year-to-Date ▼  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.87148  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR VICTOR PERINI Mailing Address 9304 GROVE PARK (  City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State TN  C  Occupation VP TRC	Zip Code 38139 Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  JIMMY PERREN  Mailing Address 1250 BRAY PARK DE  City  COLLIERVILLE  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  Other (specify)	State TN C Occupation VP REGU	Zip Code 38017  1  JLATORY COMPLIANCE  Year-to-Date ▼  1500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87179  Amount of Each Receipt this Period  75.00
SUBTOTAL of Receipts This Page (optional) .			175.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person the name and address of any political committee of the NC. POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL PETEROY Mailing Address 4769 STAVANGE	R I ANF	Date of Receipt
City LAS VEGAS	State Zip Code NV 89147	Transaction ID: INC.A.86884  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR PRODUCT DEVELOPMENT  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) MR NATHAN PETERSON Mailing Address 1520 PEMBROKE	PASS	Date of Receipt  0 9 1 1 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.86761
CHANHASSEN  FEC ID number of contributing federal political committee.	MN 55317	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR THOMAS PETTYES		Date of Receipt
Mailing Address 8522 UPLAND LN	NORTH	09 11 2010
City	State Zip Code	Transaction ID: INC.A.86705
MAPLE GROVE  FEC ID number of contributing federal political committee.	MN 55311	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	•	100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ay not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  MARTINE PFLIEGER  Mailing Address 44 HENRY TERRACE			Date of Receipt
	mamig / total cost 44   TENT   TENT   TENT	-		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87115
	LINCOLN PARK	NJ	07035	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR ATT		
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	1
-	Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0	
В.	MR LOUIS PICONE			Date of Receipt
	Mailing Address 37 TAMARACK DRIVI			09 / 11 / Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.87031
	SUCCASUNNA  FEC ID number of contributing federal political committee.	C	07876	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
С. С.	Full Name (Last, First, Middle Initial) MR THOMAS PIERCE			
	Mailing Address 10297 E. LAKE DR.			09 / 11 / 2010
	City	State	Zip Code	Transaction ID: INC.A.87103
	ENGLEWOOD  FEC ID number of contributing federal political committee.	C	80111	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LAB	OR RELATIONS	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
ŀ	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any persename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DR PAGE PIGG Mailing Address 9297 ANGLER TRL  City MECHANICSVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code VA 23116  C  Occupation DIR CLINICAL SVCS  Aggregate Year-to-Date  500.00	Date of Receipt  0 9 1 1 2 0 1 0  Transaction ID: INC.A.86758  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS JUDITH PLATKIN  Mailing Address 29 BLACKWELL AVE  City MORRISTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07960  C  Occupation SVP & GENERAL MGR  Aggregate Year-to-Date   3846.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  O 9 111 2010  Transaction ID: INC.A.86570  Amount of Each Receipt this Period  192.30
Full Name (Last, First, Middle Initial)  MR RICHARD PONESSE  Mailing Address 10 DISTILLERY PATI  City  NEWBURGH  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  Other (specify)	State Zip Code NY 12550  C  Occupation VP PRICING  Aggregate Year-to-Date   500.00	Date of Receipt  M M M J D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		247.30

	d address of any political committee to  AL ACTION COMMITTEE (a.k.a.  e Zip Code 10952	solicit contributions from such committee.
A. MS JANET PORAT  Mailing Address 5 CRABAPPLE CT  City State  MONSEY NY  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)	Dation FECHNOLOGY egate Year-to-Date ▼	Transaction ID: INC.A.86708  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)	500.00	
Mailing Address 19642 S.W. 88 LOOP  City State  DUNNELLON FL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	34432 Dation	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
IDIR (	ogate Year-to-Date ▼ 500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<del></del>	43065	Transaction ID: INC.A.86868  Amount of Each Receipt this Period  50.00  CDP
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152 / 438 (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	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE	-		Date of Receipt
	Mailing Address 875 ALEXANDRIA CT			09 11 7 2010
	City	State	Zip Code	Transaction ID: INC.A.86817
	RAMSEY  FEC ID number of contributing federal political committee.	C	07446	Amount of Each Receipt this Period 192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP HR	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3846.00	
В.	Full Name (Last, First, Middle Initial) MR ROBERT PRITCHET Mailing Address 135 HOLLYBERRY D	DIVE		Date of Receipt
	Maining Address 135 HOLL FBLANT D	niv L		09 11 2010
	City	State NY	Zip Code	Transaction ID: INC.A.86935
	HOPEWELL JUNCTION  FEC ID number of contributing federal political committee.	C	12533	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR (	n CONTRACT ADMINISTRATI	ION
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) MR JASON PROULX	Date of Receipt		
	Mailing Address 3601 LEANNE DRIVE			09 / 11 / 2010
	City FLOWER MOUND	State TX	Zip Code 75022	Transaction ID: INC.A.87030  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75022	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP OPS	n PLANNING	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)	1		267.30
ŀ	TOTAL This Period (last page this line number	only)	·	

		for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	lress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MARK PROULX Mailing Address 20 BRANDY RIDGE	ROAD		Date of Receipt  0 9 1 1 1 2 0 1 0
City SPARTA	State NJ	Zip Code 07871	Transaction ID: INC.A.87023  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		F OPERATIONS	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3846.20	
Full Name (Last, First, Middle Initial) MS CATHERINE PURDUE Mailing Address 318 NEWBURY DRI	IVE		Date of Receipt  0 9 1 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.86963
MONROEVILLE  FEC ID number of contributing federal political committee.	C	15146	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n INESS DEV	
Receipt For:  Primary General  Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) SYED QUADRI			Date of Receipt
Mailing Address 6040 KENNEDY BL' APT 30N	VD EAST		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC.A.87014  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 PRIV		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	)		242.31

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 154 / 438   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GILBERT RAINES			Date of Receipt
Mailing Address 800 SANDY TRAIL			M M / D D / Y Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City KELLER	State TX	Zip Code	Transaction ID: INC.A.87048
FEC ID number of contributing federal political committee.	C	76248	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 975.00	
Full Name (Last, First, Middle Initial) MS FRANCES RAO			Date of Receipt
Mailing Address 19 ROSS ROAD			M M / D D / Y Y Y Y Y O D D / Y 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.86607
FEC ID number of contributing federal political committee.	C	10303	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n R REGULATORY	
Receipt For:  Primary General  Other (specify) ▼	<del>-   '</del>	e Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) MRS DOLORES RAPUANO			Date of Receipt
Mailing Address 57660 BEAVER VA	LLEY RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City QUAKER CITY	State OH	Zip Code	Transaction ID: INC.A.86987
FEC ID number of contributing federal political committee.	C	43773	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n ELIGIBILITY	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 438 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MRS MONICA REED  Mailing Address 8475 DUNHAM STAT  City  TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State FL  C  Occupatio VP PRO		Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.86812  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  MS MARGARET REICHENBACHER  Mailing Address 26 UNDERWOOD DF  City  WEST ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State NJ  C  Occupatio SR DIR	Zip Code 07052	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.86831  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MRS HEATHER REIGLE Mailing Address 10816 BARBADOS IS  City TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State FL  C  Occupatio SR DIR (	Zip Code 33647  n CUST SVC e Year-to-Date ▼ 500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86609  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line number		•	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS Mailing Address 204 TOKENEKE RD  City DARIEN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State CT C Occupation VP BIAC	Zip Code 06820	Date of Receipt    M M   D D   2 0 1 0
Full Name (Last, First, Middle Initial) MR VICTOR RENNA  Mailing Address 8 CARLA ANN CT  City FLANDERS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	<del>, '</del>	Zip Code 07836  CUREMENT & INVENTORY Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.86984  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MRS YVETTE RENNIE Mailing Address 1 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)	State NJ  C  Occupation SR DIR F  Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			125.00

	MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one		
Any or fo	information copied from such Reports and S r commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
\ \	IAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
	ull Name (Last, First, Middle Initial) IR JOSEPH REYNOLDS			Date of Receipt		
N	failing Address 412 RIVER MEWS LA	NE		09 11 2010		
	ity EDGEWATER	State NJ	Zip Code 07020	Transaction ID: INC.A.87045  Amount of Each Receipt this Period		
F	EC ID number of contributing ederal political committee.	C		70.00		
N N	lame of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n R TECHNOLOGY			
R	leceipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1400.00			
	ull Name (Last, First, Middle Initial)			Date of Receipt		
_		Address 1398 SW PENISULA LANE				
	City PALM CITY	State FL	Zip Code 34990	Transaction ID: INC.A.87180  Amount of Each Receipt this Period		
F	EC ID number of contributing ederal political committee.	C		25.00		
N	lame of Employer CCREDO HEALTH GROUP	Occupatio	n CCT MGR PHARM MANUFA	CT		
R	ecceipt For: Primary General Other (specify) ▼	<del>- '</del>	e Year-to-Date ▼ 500.00			
	ull Name (Last, First, Middle Initial) IS ANGELA RIECK			Date of Receipt		
_	failing Address 5 EGBERT AVENUE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	ity //ORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.87153  Amount of Each Receipt this Period		
F	EC ID number of contributing ederal political committee.	C	07300	25.00		
N N	lame of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PER	n RFORMANCE CONSULTING			
R	eceipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00			
SUE	BTOTAL of Receipts This Page (optional)	1		120.00		

	DULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 158 / 438   (check only one)
Any inform or for comr	nation copied from such Reports and Smercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
1 \	OF COMMITTEE (In Full) CO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	me (Last, First, Middle Initial)			Date of Receipt
Mailing	Address 13 HILLCREST ROAD	)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TOW A	4CO	State NJ	Zip Code 07082	Transaction ID: INC.A.87093  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C	07002	25.00
Name o	of Employer O HEALTH SOLUTIONS	Occupatio DIR FINA		
	t For: rimary General other (specify) ▼	_ '	e Year-to-Date ▼ 475.00	
	me (Last, First, Middle Initial) LLIAM RINCON			Date of Receipt
Mailing	Address 32 CLINTON VIEW T	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City HEWI	тт	State <b>NJ</b>	Zip Code 07421	Transaction ID: INC.A.86859  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C		25.00
Name of MEDCo	of Employer O HEALTH SOLUTIONS	Occupatio DIR BUS	n SINESS REQUIREMENTS	
	t For: rimary General bther (specify) ♥	_ '	e Year-to-Date ▼ 500.00	
	me (Last, First, Middle Initial) ETH RITCHIE			Date of Receipt
	Address 27 DAY RD			M M / D D / Y Y Y Y O D O O O O O O O O O O O O O O
City	SANT VALLEY	State CT	Zip Code 06063	Transaction ID: INC.A.87108  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C		50.00
Name of MEDCo	of Employer O HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS DEVELOPMENT	
	t For: rimary General bther (specify) ▼		e Year-to-Date ▼ 1000.00	
SUBTOTA	AL of Receipts This Page (optional) .		<b>__</b>	100.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
_	information copied from such Reports and r commercial purposes, other than using the IAME OF COMMITTEE (In Full)	Statements may ne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
. <u>N</u>	// Alling Address 7845 E 5TH ST			Date of Receipt
	City	State	Zip Code	0 9 1 1 2 0 1 0  Transaction ID: INC.A.86573
F	DOWNEY FEC ID number of contributing ederal political committee.	CA	90241	Amount of Each Receipt this Period  25.00
N N	lame of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		_
R	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
M	iull Name (Last, First, Middle Initial) MR DAVID ROBARGE Mailing Address 4565 QUEENSLAND	LNN		Date of Receipt
C	Dity	State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.86655
<u>N</u>	MINNEAPOLIS	MN	55446	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		25.00
	lame of Employer //EDCO HEALTH SOLUTIONS		CLINICAL SVCS	
R	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	ull Name (Last, First, Middle Initial) MRS JENNIFER ROBERTS			Date of Receipt
M	Mailing Address 1342 DALTON CT			09 / 11 / Y Y Y Y Y Y
	City FAIRFIELD	State OH	Zip Code 45014	Transaction ID: INC.A.86696  Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		12.50
	lame of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
R	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
SIII	BTOTAL of Receipts This Page (optional)			62.50

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
An	y information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P  Full Name (Last, First, Middle Initial)	OLITICAL /	ACTION COMMITTEE (a.k.a	, 
۸.	MS TRACEY RODGERS-LENGE  Mailing Address 19 FARMINGTON COU	JRT		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.86579  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07710	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLIN	n NICAL SVCS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) MS SORAYA RODRIGUEZ-BALZAC Mailing Address 22 PAPOOSE TRAIL			Date of Receipt  0 9 1 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87044
	ANDOVER FEC ID number of contributing federal political committee.	NJ C	07821	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n MARKETING	
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) ERIC ROELOFS			Date of Receipt
	Mailing Address 9 STRATFORD WAY			09 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MORRIS PLAINS	State NJ	Zip Code 07950	Transaction ID: INC.A.87145  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07000	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n CHNOLOGY	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.00	
SI	JBTOTAL of Receipts This Page (optional)			75.00
T,	OTAL This Period (last page this line number of	anly)	•	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P			on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO			Date of Receipt
Mailing Address 855 CLUB MOSS CT.			09 11 2010
City	State	Zip Code	Transaction ID: INC.A.86724
MARIETTA	GA	30068	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRESIDE	n ENT SYSTEMED	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3846.00	
Full Name (Last, First, Middle Initial) DAVID ROOT			Date of Receipt
Mailing Address 212 SPRING BRANCH	ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87122
WAVERLY	VA	23890	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR STA	n TE GOVERNMENT AFFAIR	s
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS DONNA ROSEN			Date of Receipt
Mailing Address 7 RED OAK LANE			09 11 7 2010
City	State	Zip Code	Transaction ID: INC.A.86936
KINNELON	NJ	07405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS-	n -CLINICAL TECH	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)			267.30

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

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS	•		Date of Receipt
	Mailing Address 7227 RAMOTH DRIVE	_		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86682
	JACKSONVILLE	FL	32226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR FORMULARY CONSULT	ING
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- В.	Full Name (Last, First, Middle Initial) MS LAUREN RUBENSTEIN			Date of Receipt
	Mailing Address 345 WINTHROP DRIV		09 11 2010	
	City	State	Zip Code	Transaction ID: INC.A.86983
	NUTLEY	NJ	07110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	. '	CHNOLOGY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
С. С.	Full Name (Last, First, Middle Initial) MR RICHARD RUBINO			Date of Receipt
	Mailing Address 3 APACHE DRIVE			09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86932
	OAKLAND	NJ	07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		193.00
	Name of Employer MEDCO HEALTH SOLUTIONS		IANCE & CHIEF FIN OFFCR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3860.00	
	SUBTOTAL of Receipts This Page (optional)			268.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK Mailing Address 21 SKY TOP RIDGE  City OAKLAND	State NJ	Zip Code 07436	Date of Receipt  0 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86750  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:	<del></del>	n ICAL MGMT & SVCS	50.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS KAREN RUSSELL	33 13 15	1000.00	Date of Receipt
Mailing Address 148 CLUBHOUSE DI  City WEST COLUMBIA  FEC ID number of contributing federal political committee.	State SC	Zip Code 29172	Transaction ID: INC.A.86601  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		CLINICAL SVCS  Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) MS KATHERYN RUSSI Mailing Address 5965 VILLAGE CIRC	LE		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City  JOHNSTON  FEC ID number of contributing federal political committee.	State IA	Zip Code 50131	Transaction ID: INC.A.86623  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	<del>'</del>	R CLINICAL SVCS  Year-to-Date ▼  1000.00	
SUBTOTAL of Receipts This Page (optional)			125.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	uny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
<u>ر</u> 4.	Full Name (Last, First, Middle Initial) MR ANTHONY RUSSO			Date of Receipt
	Mailing Address 66 FINCH RD			09 / 11 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.86878
	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	Occupatio VP PRO		
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	1
	Other (specify) ▼		0 0 0 0 0 0 0	
3.	Full Name (Last, First, Middle Initial) MS JENNIFER RUSSO			Date of Receipt
	Mailing Address 35 DEAN ST.			09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87066
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n MARKETING	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		335.00	
_	Full Name (Last, First, Middle Initial) JULIANA RUTH			Date of Receipt
	Mailing Address 1 UNDERCLIFF TER	RACE		0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87156
	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		BUSINESS DEVELOPMENT	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify) ▼		1000.00	
	SUBTOTAL of Receipts This Page (optional)			125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 165 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any programming the name and address of any political committee.  NC. POLITICAL ACTION COMMITTEE (a)	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR JESSE RUZICKA  Mailing Address 334 MORRIS AVE	≣	Date of Receipt  0 9 1 1 2 0 1 0
City BOONTON FEC ID number of contributing	State Zip Code NJ 07005	Transaction ID: INC.A.87067  Amount of Each Receipt this Period  30.00
Receipt For:  Primary  General	Occupation NATL ACCT EXEC  Aggregate Year-to-Date   600.00	30.00
Full Name (Last, First, Middle Initial)  MS MARY RYAN  Mailing Address 456 RICHMOND	0 0 0 0 0 0 0	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  MAPLEWOOD  FEC ID number of contributing federal political committee.	State Zip Code NJ 07040	Transaction ID: INC.A.86925  Amount of Each Receipt this Period  78.34
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation VP PHARMACY REGULATORY  Aggregate Year-to-Date   1488.46	
Full Name (Last, First, Middle Initial)  MRS CYNTHEA RYDER  Mailing Address 74 CHOCTAW TF	RAIL	Date of Receipt  0 9 1 1 2 0 1 0
City RINGWOOD FEC ID number of contributing	State Zip Code NJ 07456	Transaction ID: INC.A.86588  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR E-COM STRAT & DELIV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	1
SUBTOTAL of Receipts This Page (option	nal)	133.34

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>^</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 166 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MISS CYNTHIA RYLANDS			Date of Receipt
Mailing Address 4836 MIDDLE RD			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State PA	Zip Code	Transaction ID: INC.A.86962
ALLISON PARK  FEC ID number of contributing federal political committee.	C	15101	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n SINESS REQUIREMENTS	
Receipt For:  Primary General  Other (specify) ▼	<del>-                                    </del>	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR RYAN SADLER			Date of Receipt
Mailing Address 85 VANCE ST. #20	)1		M M / D D / Y Y Y Y Y O D D / 2010
City MEMPHIS	State TN	Zip Code 38103	Transaction ID: INC.A.87131
FEC ID number of contributing federal political committee.	C	30103	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR GOV	n /ERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) CHRISTOPHER SANDERS			Date of Receipt
Mailing Address 7475 MINK HOLLO	)W ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HIGHLAND	State MD	Zip Code 20777	Transaction ID: INC.A.87144
FEC ID number of contributing federal political committee.	C	20111	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CAC		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	<b>I</b>		75.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	5A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 167/438   (check only one)     X   11a
Any information copied from such Reports or for commercial purposes, other than us	and Statements may ing the name and addr	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	NC. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE			Date of Receipt
Mailing Address 7 AHERN WAY			M M / D D / Y Y Y Y Y O D D / 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.86787
WEST ORANGE FEC ID number of contributing federal political committee.	C	07052	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	NTERPRISE BUS INTELLI	
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR MATTHEW SARDY			Date of Receipt
Mailing Address 230 FAIRFIELD	AVE.		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.86660
FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAN		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MS BETH SAVARE			Date of Receipt
Mailing Address 27 JONES LN			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BLAIRSTOWN	State NJ	Zip Code 07825	Transaction ID: INC.A.86929
FEC ID number of contributing federal political committee.	C	07625	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR P	HARM OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optic	onal)		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 168 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to c. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS TRINA SAYLER  Mailing Address 56 LAKESIDE DRIV  City  RAMSEY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code NJ 07446  C  Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date  300.00	Date of Receipt  M M / D D / Y Y Y Y Y  O 9 11 1 2 0 1 0  Transaction ID: INC.A.87000  Amount of Each Receipt this Period  15.00
Full Name (Last, First, Middle Initial) MR MITCHELL SCHERF Mailing Address 739 CAMBERWELL  City EAGAN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86747  Amount of Each Receipt this Period  25.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR DAVID SCHLETT  Mailing Address 339 GRAMERCY PI  City GLEN ROCK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	500.00	Date of Receipt  M M J D D J Z D J Z D J D J Z D J D J Z D J D J
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 169 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any persename and address of any political committee POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR DENNIS SCHONBACHLER  Mailing Address 6 TRIBECA AVE  UNIT 207  City  JERSEY CITY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code NJ 07305  C  Occupation DIR INTERNATIONAL MARKETS  Aggregate Year-to-Date  250.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) ERIC SCHUPP Mailing Address 340 S. MAIN  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code TN 38103  C  Occupation DIR PRODUCT LINE II Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ  Mailing Address 9111 N KARLOV  City SKOKIE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code IL 60076  C  Occupation EXEC DIR CLINICAL SVCS  Aggregate Year-to-Date   1000.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y
SUBTOTAL of Receipts This Page (optional)	1	100.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(Check only one)
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any not the name and address of any political commit	person for the purpose of soliciting contributions tree to solicit contributions from such committee.  a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) BRUCE SCOTT Mailing Address 18650 BEARPATH		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 EDEN PRAIRIE  FEC ID number of contributing federal political committee.	State Zip Code MN 55347	Transaction ID: INC.A.87147  Amount of Each Receipt this Period  192.31
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼	Occupation PRESIDENT  Aggregate Year-to-Date   3846.20	
Full Name (Last, First, Middle Initial)  MS CYNTHIA SCOTT  Mailing Address 18650 BEARPATH	H TRAIL	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City EDEN PRAIRIE FEC ID number of contributing	State Zip Code MN 55437	Transaction ID: INC.A.86574  Amount of Each Receipt this Period
rederal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP CLINICAL PROG DEV Aggregate Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT Mailing Address 7330 EVEREST L	ANE - NORTH	Date of Receipt
City MAPLE GROVE	State Zip Code MN 55311	Transaction ID: INC.A.86986  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	50.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (option	nal)	292.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 171 / 438 (check only one)    X   11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE  Mailing Address 3021 E MILLCREEK I  City SALT LAKE CITY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	ROAD  State Zip Code UT 84109  C  Occupation EXEC DIR CLINICAL SVCS  Aggregate Year-to-Date  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86564  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR ROBERT SENDEWICZ Mailing Address 1220 CROSSING WA  City WAYNE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07470  C  Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.86611  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV  Mailing Address 66 PROSPECT AVE  City WESTWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07675  C  Occupation VP BUSINESS DEV  Aggregate Year-to-Date  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		125.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 172 / 438 (check only one)    X
C	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	ress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MRS PATRICIA SGARELLA			Date of Receipt
	Mailing Address 275 MAIN STREET			09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87019
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR P		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼ 500.00	
_	Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR THOMAS SHANAHAN, III		0 0 0 0 0 0 0	Date of Receipt
	Mailing Address 1767 FAIRMOUNT STREET			0 9 1 1 2 0 1 0
	City State		Zip Code	Transaction ID: INC.A.86844
	CARMEL	IN	46032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS		DLOGY TRC OPS	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	7
	Other (specify) ▼	0 0	1800.00	
	Full Name (Last, First, Middle Initial) MR ROBERT SHANNON	<u>'</u>		Date of Receipt
	Mailing Address 59 DANNER AVE			0 9 1 1 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.86937
	HARRISON	NY	10528	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA	NCE	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	-
	Other (specify)		500.00	
Γ	SUBTOTAL of Receipts This Page (optional) .	1		80.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 173 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR JOHN SHEA			Date of Receipt
	Mailing Address 62 FRANKLIN TURNP  City	IKE State	Zip Code	0 9 1 1 2 0 1 0  Transaction ID: INC.A.86586
	ALLENDALE	NJ	07401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CC		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 800.00	
- В.	Full Name (Last, First, Middle Initial) MR FRANK SHEEHY Mailing Address 550 KNOLLWOOD RC	ΔΩ		Date of Receipt
		09 11 2010		
	City	State	Zip Code	Transaction ID: INC.A.86671
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3840.00	
с. С.	Full Name (Last, First, Middle Initial) DAWN SHERMAN			Date of Receipt
	Mailing Address 63 BRAMSHILL DRIVE	Ī		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87116
	MAHWAH  FEC ID number of contributing federal political committee.	NJ C	07430	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP & CO	n O INTL STRATEGY & OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			282.00
-	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  MR PETER SHERMAN  Mailing Address 139 GATES AVENUE			Date of Receipt
				09 11 2010
	City MONTCLAIR	State NJ	Zip Code 07042	Transaction ID: INC.A.86557
	FEC ID number of contributing federal political committee.	C	07042	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST G	on ENERAL COUNSEL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) WENDELL SHERRELL			Date of Receipt
	Mailing Address PO BOX 748			09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87143
	COLLIERVILLE  FEC ID number of contributing federal political committee.	C	38027	Amount of Each Receipt this Period  30.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR ACC	on CDO CORP HR & TALENT N	MGT
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 540.00	
C.	Full Name (Last, First, Middle Initial) MR JAMES SHIVAS			Date of Receipt
	Mailing Address 18 PROSPECT AVE			0 9
	City NORTH ARLINGTON	State NJ	Zip Code 07031	Transaction ID: INC.A.86778  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRI		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .			105.00
	TOTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 175 / 438   (check only one)
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
<u> </u>	Full Name (Last, First, Middle Initial) MR ELWOOD SIDES III			Date of Receipt
	Mailing Address 150 CLAREMONT AV	Έ		0 9 1 1 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.86684
	LONG BEACH FEC ID number of contributing federal political committee.	CA	90803	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) MS ANNE SIGILLITO			Date of Receipt
	Mailing Address 67 FAIRHAVEN DRIV	Έ		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ALLENDALE	State NJ	Zip Code 07401	Transaction ID: INC.A.86561  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0,101	15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR (	n GENERIC STRAT & CUST [	 DV
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) MS JODI SILBERMANN			Date of Receipt
	Mailing Address 16 TULIP LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State NJ	Zip Code	Transaction ID: INC.A.86948
	RANDOLPH  FEC ID number of contributing federal political committee.	C	07869	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n FINANCE	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)	1		65.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 176 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JEFFREY SIMEK			Date of Receipt
	Mailing Address 3555 GRANDE TUSC	ANY WAY		09 11 7 2010
	City NEW SMYRNA BEACH	State FL	Zip Code 32168	Transaction ID: INC.A.86808  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 COR	n P COMMUNICATIONS	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1585.86	
В.	Full Name (Last, First, Middle Initial) MR JAMES SIMON	1 ADT 740		Date of Receipt
	Mailing Address 2500 STATE HWY 12	09 11 7 2010		
	City EULESS	State TX	Zip Code 76039	Transaction ID: INC.A.86693  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	7 0000	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR SEC		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 475.00	
_ С.	Full Name (Last, First, Middle Initial) MR LEE SIMON			Date of Receipt
	Mailing Address 2390 GREENVIEW R	OAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City NORTHBROOK	State IL	Zip Code 60062	Transaction ID: INC.A.86993  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:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional) .		<b>\</b>	125.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 177 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) MR JEFFREY SINKO Mailing Address 10 CHERRY TREE LAN City KINNELON FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ  C Occupation	Zip Code 07405 on ENERAL COUNSEL	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
_	Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate	e Year-to-Date ▼ 950.00	
В.	MR WILLIAM SIRICO  Mailing Address 564 DALE COURT EAS  City  RIVER VALE  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 07675 on TECHNOLOGY e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.86610  Amount of Each Receipt this Period  30.00
с. -	Full Name (Last, First, Middle Initial) MR JOHN SISTO  Mailing Address 24 MAYBERRY LANE  City MECHANICSBURG  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 17050 on PHARMACY REGULATORY e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86917  Amount of Each Receipt this Period  25.00
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		<u> </u>	105.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 178 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR DAVID SITVER Mailing Address 24 YORKSHIRE AVE  City SUFFERN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10901  C  Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date  500.00	Date of Receipt    Date of Receipt
Full Name (Last, First, Middle Initial) ARUNBABU SIVAGAMINATHAN Mailing Address 11 LINDA CT  City LINCOLN PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07035  C  Occupation TECHNICAL SPECIALIST  Aggregate Year-to-Date  250.00	Date of Receipt  M M / D D / Y Y Y Y Y  O 9 11 1 2010  Transaction ID: INC.A.87094  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR BRADLEY SKATTER Mailing Address 6433 FRANKLIN HILL  City INDEPENDENCE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code MN 55359  C  Occupation EXEC DIR CLINICAL SVCS Aggregate Year-to-Date  1000.00	Date of Receipt  M M M J D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 438 (check only one)    X   11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR EDWARD SKRIPATA  Mailing Address 70 RIVER ROAD	POLITICAL ACTION COMMITTEE (a.k.a	Date of Receipt
UNIT D9 City CLIFTON	State Zip Code NJ 07014	Transaction ID: INC.A.86895  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL OPECIALIST	25.00
Receipt For:  Primary General  Other (specify) ▼	TECHNICAL SPECIALIST  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial) ANN SMITH Mailing Address 437 GLENDALE RD		Date of Receipt  0 9 1 1 2 0 1 0
City WYCKOFF	State Zip Code NJ 07481	Transaction ID: INC.A.86785  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PUBLIC AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	
Full Name (Last, First, Middle Initial) MR ROBERT SMITH Mailing Address 40 JOSHUA DR T		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 RAMSEY	State Zip Code NJ 07446	Transaction ID: INC.A.86957  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
		125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for eac	eparate schedule(s) th category of the ed Summary Page	FOR LINE NUMBER: PAGE 180 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and address of ar	ny political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR ERIC SMITHER  Mailing Address 1132 NORTH ST I	RT 123		Date of Receipt  0 9 1 1 2 0 1 0
City  LEBANON  FEC ID number of contributing federal political committee.	State Zip C OH 4503		Transaction ID: INC.A.86703  Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR OPS Aggregate Year-to-D	Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR Mailing Address 23 CEDAR GATE	ROAD		Date of Receipt  0 9 1 1 2 0 1 0
City  DARIEN  FEC ID number of contributing	State Zip C CT 0682		Transaction ID: INC.A.87032  Amount of Each Receipt this Period
rederal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation CHAIRMAN & CE Aggregate Year-to-D		192.31
Full Name (Last, First, Middle Initial) MR ALAN SOKALER Mailing Address 30 MICHELLE WA	Y		Date of Receipt
City PINE BROOK  FEC ID number of contributing federal political committee.	State Zip C NJ 0705		0 9 1 1 2 0 1 0  Transaction ID: INC.A.87068  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-D	1000.00	
SUBTOTAL of Receipts This Page (option	al)		254.81

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 181 / 438   (check only one)     X
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE			Date of Receipt
Mailing Address 6108 HUNTER LAN	NE		M M / D D / Y Y Y Y Y O D D / 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.86870
COLLEYVILLE FEC ID number of contributing federal political committee.	C	76034	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 975.00	
Full Name (Last, First, Middle Initial) MS MICHELE ST CLAIR			Date of Receipt
Mailing Address 7 EVERGREEN DF UNIT 47			09 / 11 / 2010
City CLIFTON	State NJ	Zip Code 07014	Transaction ID: INC.A.87001  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 FOR	n MULARY & COVERAGE M	— GMT
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) BRENDA STAFFORD			Date of Receipt
Mailing Address 647 BERKELEY AV	/ENUE		0 9 1 1 2 0 1 0
City ORANGE	State NJ	Zip Code 07050	Transaction ID: INC.A.87149  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	7,000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CC		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional			75.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than to NAME OF COMMITTEE (In Full)	ts and Statements may not be sold or used by any perso using the name and address of any political committee to S INC. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR RALPH STAIANO Mailing Address 1 LAMBROS D  City MONROE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10950  C  Occupation SR DIR BUSINESS REQUIREMENTS Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86575  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) PETER STARK  Mailing Address 4840 COLE RO  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	OAD  State Zip Code TN 38117  C  Occupation CHIEF FINANCIAL OFFICER Aggregate Year-to-Date  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87207  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN Mailing Address 7 FOREST LAW  City WEST HARRISON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10604  C  Occupation SVP FINANCIAL & ANALYTICAL SV Aggregate Year-to-Date  3846.20	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (op	tional)	267.31

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 183 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)	OLITIOAL 7	TOTION CONTINUE (a.r. a	, 
A.	CHANNING STAVE  Mailing Address 77 HIGHVIEW AVE			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City TUCKAHOE	State NY	Zip Code 10707	Transaction ID: INC.A.87120  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n MARKETING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- В.	Full Name (Last, First, Middle Initial) MS JILL STEARNS Mailing Address 13130 HALSELL DR			Date of Receipt
	City	State	Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.86996
	AUSTIN	TX	78732	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- С.	Full Name (Last, First, Middle Initial) MR CRAIG STEEL			Date of Receipt
О.	Mailing Address 122 DEMAREST AVEN	NUE		M M / D D / Y Y Y Y O D D / 2010
	City EMERSON	State NJ	Zip Code 07630	Transaction ID: INC.A.86713  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07030	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
f	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FECTIFICATION OF SCHEDULE A (FETTIFICATION OF SCHEDULE A (FETT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 184 / 438   (check only one)
Any information copied from sucl or for commercial purposes, other	h Reports and Statements may er than using the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (IN I	· ·	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle  MS AMY STEINKELLNER	Initial)		Date of Receipt
Mailing Address 728 GUL C/O PO E	F BOULEVARD BOX 834		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.86767
INDIAN ROCKS BEACH FEC ID number of contributin federal political committee.		33785	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIO	NS Occupation VP NATION	ONAL PRACTICE LEADER	7
Receipt For:  Primary Gene  Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle MS LEAH STERMAN-KABRT	Initial)		Date of Receipt
Mailing Address 24 OAK I			09 / 11 / 2010
City NORTH CALDWELL	State NJ	Zip Code 07006	Transaction ID: INC.A.86782  Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.		0,000	25.00
Name of Employer MEDCO HEALTH SOLUTIO	NS Occupation TECHNIC	n CAL SPECIALIST	
Receipt For:  Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle DR GLEN STETTIN	Initial)		Date of Receipt
Mailing Address 8 MILL G	ILEN CT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.87016
FEC ID number of contributin federal political committee.		07430	Amount of Each Receipt this Period 192.31
Name of Employer MEDCO HEALTH SOLUTIO	NS Occupation SVP/GM	n ADVANCED CLINICAL SLT	
Receipt For:  Primary Gene  Other (specify) ▼		Year-to-Date ▼ 3846.20	
SUBTOTAL of Receipts This P	age (entional)		267.31

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 185 / 438   (check only one)     X
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may not be sold or used by any per ng the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS I	NC. POLITICAL ACTION COMMITTEE (a.k	.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GERARD STOCKER, JR		Date of Receipt
Mailing Address 80 ALGONQUIN	TRL	0 9 1 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OAKLAND	State Zip Code NJ 07436	Transaction ID: INC.A.86714  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MS JANNA STOUL		Date of Receipt
Mailing Address 4 APACHE WAY		0 9 1 1 2 0 1 0
City MONTVILLE	State Zip Code NJ 07045	Transaction ID: INC.A.86597  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 07045	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS SUZANNE STREDNAK		Date of Receipt
Mailing Address 157 WATCHUNG	B DR	0 9 1 1 2 0 1 0
City HAWTHORNE	State Zip Code NJ 07506	Transaction ID: INC.A.86656  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 07300	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optic	onal)	125.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 186 / 438 (check only one)    X   11a
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	s and Statements may not be sold or used by any perso ing the name and address of any political committee to	
` '	INC. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MS PATRICIA STRETE  Mailing Address 19275 PAVER B	ADNICE DOAD	Date of Receipt
City	State Zip Code	0 9 1 1 2 0 1 0  Transaction ID: INC.A.86645
MARYSVILLE	OH 43040	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL THERAPEUTICS	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MILAYNA SUBAR, MD Mailing Address 11 RIVERSIDE [		Date of Receipt
#8CE		09 11 2010
City	State Zip Code	Transaction ID: INC.A.87146
NEW YORK	NY 10023	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 NATIONAL PRACTICE LEADER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) MRS WILARENE SUGGS	1	Date of Receipt
Mailing Address 5111 FLUSS CV	N	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.86871
BARTLETT  FEC ID number of contributing federal political committee.	TN 38018	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR SPECIALTY OPS CUST SVC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SURTOTAL of Receipts This Page (opti	onal)	80.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 187 / 438 (check only one)    X
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	o solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) MS COLEEN SULLIVAN Mailing Address 38 BARKMILL TERRAG	State	Zip Code	Date of Receipt  0 9 1 1 2 0 1 0  Transaction ID: INC.A.86994
	MONTVILLE FEC ID number of contributing federal political committee.	C	07045	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	_	n ΓECHNOLOGY • Year-to-Date ▼ 500.00	
- З.	Full Name (Last, First, Middle Initial) MR MARK SULLIVAN Mailing Address 16025 PINE VALE PL.			Date of Receipt  0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.86583
	MIDLOTHIAN  FEC ID number of contributing federal political committee.	C	23113	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINES	n SS PROCESS SPECIALIST	
	Receipt For:  Primary  General  Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
- ).	Full Name (Last, First, Middle Initial) MR FREDERICK SUMNER Mailing Address 808 HOLLYWOOD AV	ENUE		Date of Receipt  0 9 1 1 2 0 1 0
	City HO-HO-KUS	State NJ	Zip Code 07423	Transaction ID: INC.A.86665  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07425	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n PROJECT MGMT	
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
Г				100.00

	Detailed Summary Pag	e   X   11a   11b   11c   12   13   14   15   16   11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by an the name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS IRENE SUTTON  Mailing Address 20 AVENUE @ PC  APT 209  City	PRT IMPERIAL State Zip Code	Date of Receipt  0 9 1 1 2 0 1 0  Transaction ID: INC.A.86675
WEST NEW YORK FEC ID number of contributing federal political committee.	NJ 07093	Amount of Each Receipt this Period 40.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date ▼  800.0	00
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT  Mailing Address 8362 GOLDEN PR	AIRIE DRIVE	Date of Receipt  0 9 1 1 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.86723
TAMPA  FEC ID number of contributing federal political committee.	FL 33647	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼	00
Full Name (Last, First, Middle Initial)  MARK TANKERSLEY  Mailing Address 1374 SAWMILL CI	REEK LANE	Date of Receipt  0 9 1 1 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.87204
CORDOVA  FEC ID number of contributing federal political committee.	TN 38018	Amount of Each Receipt this Period  30.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR MEDICAL INFORMATICS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	00
SUBTOTAL of Receipts This Page (option	al)	95.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 189 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) NICOLETTE TAPAY			Date of Receipt
	Mailing Address 1338 KENYON ST. N.V		7'- 0-1	0 9 1 1 2 0 1 0 1 1 1 2 0 1 0 1 0 1 1 1 1 1
	City <u>WASHINGTON</u>	State DC	Zip Code 20010	Transaction ID: INC.A.87158  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP GOV	n ERNMENT AFFAIRS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00	
В.	Full Name (Last, First, Middle Initial) MS JOANNE TAYLOR			Date of Receipt
	Mailing Address 39 ROCKAWAY PLAC	E		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.86585
	PARSIPPANY	NJ	07054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	<sup>n</sup> CONTRACT ADMINISTRATI	ION
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	300.00	]
С. С.	Full Name (Last, First, Middle Initial) MR NICHOLAS TAYLOR			Date of Receipt
	Mailing Address 2847 NORTHWEST BL	_VD		0 9
	City	State	Zip Code	Transaction ID: INC.A.87024
	UPPER ARLINGTON  FEC ID number of contributing federal political committee.	C	43221	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL SVCS	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	]
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 190 / 438 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	v not be sold or used by any pers	13 14 15 16 10 no for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.			
Full Name (Last, First, Middle Initial) AMI THAKKAR			Date of Receipt
Mailing Address 1040 W ADAMS STF UNIT 248	REET		0 9 / 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.87041
CHICAGO	<u> </u>	60607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n CLINICAL SVCS	
Receipt For:	Aggregate	e Year-to-Date	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) MR BOOBALAN THANGAVELU			Date of Receipt
Mailing Address 13 BIRCH TERRACE			09 / 11 / 2010
City	State	Zip Code	Transaction ID: INC.A.87053
MT ARLINGTON	NJ	07856	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	n CAL SPECIALIST	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS MELINDA THIEL			Date of Receipt
Mailing Address 27 GARVEY ROAD			0 9 / D D / Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.86683
WAYNE	NJ	07470	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n PRODUCT MGMT	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)			75.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 191 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS MELISSA THOMET			Date of Receipt
	Mailing Address 721 HINMAN AVE #1E			09 11 7 2010
	City <u>EVANSTON</u>	State IL	Zip Code 60202	Transaction ID: INC.A.86591
	FEC ID number of contributing federal political committee.	C	60202	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on ACCT MGMT OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) MS MARY THORSBY			Date of Receipt
	Mailing Address 17326 ELLEN DR			09 11 2010
	City LIVONIA	State MI	Zip Code	Transaction ID: INC.A.86744
	FEC ID number of contributing federal political committee.	C	48152	Amount of Each Receipt this Period  75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	on L ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	
с. С.	Full Name (Last, First, Middle Initial) DREW THRAEN			Date of Receipt
	Mailing Address 63 STILES AVE			0 9 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87112
	MORRIS PLAINS  FEC ID number of contributing federal political committee.	NJ C	07950	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		125.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 192 / 438 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	statements may not be sold or used by any personance and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN  Mailing Address 838 COLONIAL RD  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07417  C  Occupation VP BENEFIT SYSTEMS SUPPORT Aggregate Year-to-Date  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86599  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MRS CHINNERETH TORRACA Mailing Address 95 ERNST AVENUE  City BLOOMFIELD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07003  C  Occupation DIR CLIENT REQUIREMENTS Aggregate Year-to-Date  450.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
Full Name (Last, First, Middle Initial) SHERRY TOWNSEND  Mailing Address 1327 FAIRWAY FORE  City CORDOVA  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code TN 38016  C  Occupation DIR PHARMACY PRACTICE Aggregate Year-to-Date  500.00	Date of Receipt  M M M D D D 2010  Transaction ID: INC.A.87187  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)		100.00

SCHEDULE A (FEITEMIZED RECEIP	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 193 / 438 (check only one)    X   11a
or for commercial purposes,	other than using the name and ac	ay not be sold or used by any pers ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE MEDCO HEALTH SO		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Mid MR DAVID TRICE			Date of Receipt
Mailing Address 150 B	RADFORD DR.		09 11 2010
City	State	Zip Code	Transaction ID: INC.A.86551
SCHWENKSVILLE	PA	19473	Amount of Each Receipt this Period
FEC ID number of contrib federal political committee			25.00
Name of Employer MEDCO HEALTH SOLU	TIONS Occupation TECHN	on ICAL SPECIALIST	
Receipt For:		te Year-to-Date 🔻	
Primary G  Other (specify) ▼	eneral	500.00	
Full Name (Last, First, Mid  MS CLAUDIA TUCKER	ddle Initial)		Date of Receipt
Mailing Address 713 IN	IDIAN CREEK 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.86849
<u>AMHERST</u>	VA	24521	Amount of Each Receipt this Period
FEC ID number of contrib federal political committee			120.00
Name of Employer MEDCO HEALTH SOLU	TIONS Occupation SR DIR	on GOVERNMENT AFFAIRS	
Receipt For:		te Year-to-Date ▼	
Primary G Other (specify) ▼	eneral	2100.00	
Full Name (Last, First, Mic	ddle Initial)		Date of Receipt
Mailing Address 16 FIE	ELDHEDGE DRIVE		09 11 2010
City HILLSBOROUGH	State NJ	Zip Code 08844	Transaction ID: INC.A.87003
FEC ID number of contrib federal political committee	uting	00044	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLU	TIONS Occupati	on ENT SVC DELIVERY	
Receipt For:	Aggregat	te Year-to-Date	
Primary G Other (specify) ▼	eneral	600.00	
SUBTOTAL of Receipts Th	is Page (optional)		175.00
	ge this line number only)	<del>.</del>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 194 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) MS DENISE TULP Mailing Address 273 STEVES LN  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupatio VP SAFE Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86799  Amount of Each Receipt this Period  50.00
В.	Full Name (Last, First, Middle Initial) ANN TURI Mailing Address 764 COMANCHE LANE  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupatio ASST CO	Zip Code 07417 on OUNSEL e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.87162  Amount of Each Receipt this Period  25.00
_ C.	Full Name (Last, First, Middle Initial) MR JEFFREY TYLER Mailing Address 37 KNOLL TERRACE  City HAZLET FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07730 on TECHNOLOGY 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
F	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		<u> </u>	105.77

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 195 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for co	mmercial purposes, other than using the r E OF COMMITTEE (In Full)	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
MEL	OCO HEALTH SOLUTIONS INC. PO	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	lame (Last, First, Middle Initial) ULANET			Date of Receipt
Mailir	ng Address 8803 BELMART RD			09 11 2010
City	OMAC	State MD	Zip Code 20854	Transaction ID: INC.A.87154  Amount of Each Receipt this Period
FEC	ID number of contributing al political committee.	C	20034	50.00
Name ACC	e of Employer REDO HEALTH GROUP	Occupation VP BUS	n DEV - ONCOLOGY	
	ipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 775.00	
<b>B.</b> MR K	Lame (Last, First, Middle Initial) EITH URICH  ng Address 12495 SOUTH 1745 EA	AST		Date of Receipt
		09 11 2010		
City	PER	State UT	Zip Code 84020	Transaction ID: INC.A.86771  Amount of Each Receipt this Period
FEC	ID number of contributing all political committee.	C	04020	25.00
Name MED	e of Employer CO HEALTH SOLUTIONS	Occupation	n AL VP SALES-SYSTEMED	
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	Lame (Last, First, Middle Initial) JENNIFER UTTERDYKE			Date of Receipt
	ng Address 1881 GREENTREE RO	AD		M M / D D / Y Y Y Y O O O O O O O O O O O O O O O
City	ANION	State	Zip Code	Transaction ID: INC.A.86689
FEC	ANON  ID number of contributing al political committee.	OH OH	45036	Amount of Each Receipt this Period  50.00
Name MED	e of Employer CO HEALTH SOLUTIONS	Occupation DIR MED	n DICATION SAFETY/QUALITY	<u> </u>
Rece	ipt For: Primary General Other (specify) ▼	-1	Year-to-Date ▼ 1200.00	
SUBTO	TAL of Receipts This Page (optional)			125.00
TOTAL	This Period (last page this line number o	nly)	<b>.</b>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 196 / 438   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	/ not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS CARA VAN ZILE			Date of Receipt
Mailing Address 31 LINCOLN RD			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.86735
FEC ID number of contributing federal political committee.	C	07405	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R ANALYTICAL SVCS	
Receipt For:  Primary  General  Other (specify)	<del> </del>	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MRS MICHELLE VANCURA			Date of Receipt
Mailing Address W328 S4230 SPRIN	NG RIDGE		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 53189	Transaction ID: INC.A.87174  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30103	192.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n ENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	- <del>                                    </del>	Year-to-Date ▼ 3840.00	
Full Name (Last, First, Middle Initial) MRS JEANNINE VANKLEECK			Date of Receipt
Mailing Address 56 ZIMMER AVENU	JE		0 9 1 1 2 0 1 0
City MIDLAND PARK	State NJ	Zip Code 07432	Transaction ID: INC.A.86622
FEC ID number of contributing federal political committee.	C	07432	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA	n ANCIAL APPLICATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional			267.00

	LE A (FEC Form 3X) RECEIPTS	<b>A)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 19// 438   (check only one)     X   11a     11b     11c     12     13     14     15     16     1
Any information or for commerce	n copied from such Reports an ial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 \	COMMITTEE (In Full) HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
	Last, First, Middle Initial) AS VASILOPOULOS			Date of Receipt
	ress 105 ARRANDALE F	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.86842
FEC ID nun	LE CENTRE  nber of contributing ical committee.	C	11570	Amount of Each Receipt this Period  50.00
Name of En MEDCO H	nployer EALTH SOLUTIONS	Occupation VP MKTI		
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 1000.00	
MR WIL VE				Date of Receipt
Mailing Add	ress 443 WEST SADDLI	E RIVER RD		09 / 11 / 2010
City	ADDLE RIVER	State NJ	Zip Code	Transaction ID: INC.A.86673
FEC ID nun	nber of contributing ical committee.	C	07458	Amount of Each Receipt this Period  30.00
Name of En MEDCO Hi	nployer EALTH SOLUTIONS	Occupation SR DIR F	n PRODUCT	
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 600.00	
Full Name (	Last, First, Middle Initial)			Date of Receipt
Mailing Add	ress 201 WATCHUNG A UNIT #17	VENUE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BLOOMF	IEI D	State NJ	Zip Code 07003	Transaction ID: INC.A.86668
FEC ID nun	nber of contributing ical committee.	C	77003	Amount of Each Receipt this Period  25.00
Name of En MEDCO H	nployer EALTH SOLUTIONS	Occupation SR DIR (	n COMPLIANCE	
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of	of Receipts This Page (optiona	l)		105.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 198 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GORDON VICKERS			Date of Receipt
Mailing Address 436 MOUNTAIN AV	VENUE		09 11 YYYY 2010
City WESTFIELD	State NJ	Zip Code 07090	Transaction ID: INC.A.86554  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  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR MUNISH VIJ			Date of Receipt
Mailing Address 11 BOULDER TRA	IL		M M / D D / 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.87055  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 TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	- <del>                                    </del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR STEVEN VREELAND			Date of Receipt
Mailing Address 19 ANNA STREET			0 9 1 1 2 0 1 0
City DENVILLE	State NJ	Zip Code 07834	Transaction ID: INC.A.87087  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07004	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 199 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS ANNETTE WAGNER	C. POLITICAL ACTION COMMITTEE (a.k.a	Date of Receipt
Mailing Address 8 INDIAN RUN RO.  City	AD State Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
LONG VALLEY FEC ID number of contributing federal political committee.	NJ 07853	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR MICHAEL WAIBEL Mailing Address N48 W16381 LONE	E OAK LN	Date of Receipt
City	State Zip Code	0 9 1 1 2 0 1 0 Transaction ID: INC.A.86768
MENOMONEE FALLS	WI 53051	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) MR DANIEL WALDEN		Date of Receipt
Mailing Address 450 BEECHMONT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NEW ROCHELLE	State Zip Code NY 10804	Transaction ID: INC.A.86908  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP REGULATORY & MC PROGRA	MS
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3846.20	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 200 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS THERESE WALKER			Date of Receipt
Mailing Address 363 MULBERRY C	Т		09 11 2010
City	State	Zip Code	Transaction ID: INC.A.86572
WYCKOFF  FEC ID number of contributing federal political committee.	NJ C	07481	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n PRODUCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE			Date of Receipt
Mailing Address 5445 GOODWIN A	VENUE		0 9 1 1 2 0 1 0
City DALLAS	State TX	Zip Code	Transaction ID: INC.A.87058
FEC ID number of contributing federal political committee.	C	75206	Amount of Each Receipt this Period  192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE	n ES SEGMENT LEADER	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 3846.20	
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Date of Receipt
Mailing Address 5 APPLE ORCHAR	D RD		0 9 1 1 2 0 1 0
City MOORESTOWN	State NJ	Zip Code 08057	Transaction ID: INC.A.86856
FEC ID number of contributing federal political committee.	C	00037	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1950.00	
SUBTOTAL of Receipts This Page (optional			267.31

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 201 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) LYNETTE WASHINGTON  Mailing Address 4272 MELWOOD OAK  City LAKELAND  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General	State TN C Occupation DIR TRO		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
- В.	Other (specify) ▼  Full Name (Last, First, Middle Initial) MS CATHERINE WASSON  Mailing Address 3912 CALLE ANDALUG  City  SAN CLEMENTE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	State CA C Occupation VP NATI	Zip Code 92673	Date of Receipt  M M / D D / Y Y Y Y Y  O 9 11 1 2 0 1 0  Transaction ID: INC.A.86602  Amount of Each Receipt this Period  50.00
_ C.	Full Name (Last, First, Middle Initial) MS BEVERLY WATSON  Mailing Address 2 MICHELANGELO CO  City SOMERSET  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupatio DIR BEN	Zip Code 08873 on NEFIT DELIVERY SYSTEMS e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.86900  Amount of Each Receipt this Period  25.00
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		·	100.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 202 / 438 (check only one)    X
A C	ny information copied from such Reports and r for commercial purposes, other than using the	Statements magne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MR SHERMAN WEAVER			Date of Receipt
	Mailing Address 4940 BAYBERRY DF	RIVE		09 11 2010
	City CUMMING	State GA	Zip Code 30040	Transaction ID: INC.A.87101  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		26.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 520.00	
	Full Name (Last, First, Middle Initial) MRS KELLY WEBBER			Date of Receipt
	Mailing Address 107 UPPER SADDLE	RIVER ROA	ND .	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.86829
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP COR		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2000.00	
_	Full Name (Last, First, Middle Initial) MARK WEGRYN			Date of Receipt
	Mailing Address 1717 DYMOKE DRIV	Έ		0 9 1 1 2 0 1 0
	City COLLIERVILLE	State TN	Zip Code 38017	Transaction ID: INC.A.86783  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33017	25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupatio AVP QA	n AND PRODUCT INTEGRAT	ΓΙΦΝ
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Г		1		151.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and address of any political committ	ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) LOWELL WEINER  Mailing Address 1 BURGESS COURT  City WESTFIELD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07090  C  Occupation VP CORP COMMUNICATIONS  Aggregate Year-to-Date  1000.00	Date of Receipt  O 9
Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH Mailing Address 309 WATERVIEW DF  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07417  C  Occupation GROUP PRES EMPLOYER GRO Aggregate Year-to-Date  3846.20	
Full Name (Last, First, Middle Initial) MR KENNETH WERMES  Mailing Address 26037 N WRANGLEF  City SCOTTSDALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code AZ 85255  C  Occupation VP/GM  Aggregate Year-to-Date  1900.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.86815  Amount of Each Receipt this Period  100.00
SUBTOTAL of Receipts This Page (optional) .		342.31

SCHEDULE A (FEC FOI	m 3x)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 204 / 438   (check only one)
Any information copied from such Re or for commercial purposes, other the	eports and Statements magan using the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIO		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Init MR PETER WHITE	al)		Date of Receipt
Mailing Address 2241 E. PIN #17F	CHOT AVE.		0 9 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.86584
PHOENIX  FEC ID number of contributing federal political committee.	AZ C	85016	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n ACCT MGMT OPS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Init	al)		Date of Receipt
Mailing Address 5847 CLENI	DENIN AVE		0 9 1 1 1 2 0 1 0
City DALLAS	State TX	Zip Code	Transaction ID: INC.A.86565
FEC ID number of contributing federal political committee.	C	75228	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR BUS	n SINESS REQUIREMENTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Init MR STEPHEN WILKINS, SR	al)		Date of Receipt
Mailing Address 500 PARKE	R OAKS LN		M M / D D / Y Y Y Y Y O D D / 2010
City	State	Zip Code	Transaction ID: INC.A.86911
HUDSON OAKS  FEC ID number of contributing federal political committee.	C	76087	Amount of Each Receipt this Period  15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR BUS	n SINESS PLANNING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 435.00	
SUBTOTAL of Receipts This Page	(ontional)		65.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 205 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
	d Statements may not be sold or used by any person the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON		Date of Receipt
Mailing Address 2 TIFFANY ROAD	Ctata 7in Code	0 9 1 1 2 0 1 0 1 2 0 1 0
City MORRISTOWN	State Zip Code NJ 07960	Transaction ID: INC.A.86780  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MS COLETTE WILSON		Date of Receipt
Mailing Address 16608 56TH PL W		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.86707
LYNNWOOD  FEC ID number of contributing federal political committee.	WA 98037	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS BEVERLY WINKLER		Date of Receipt
Mailing Address 17 LYNWOOD RD		M M / D D / Y Y Y Y O D D / 2010
City VERONA	State Zip Code NJ 07044	Transaction ID: INC.A.86930  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ORG DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUPTOTAL of Possints This Page (entions	)	100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 206 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  JAMES WINTRAUB			Date of Receipt
	Mailing Address 2166 BROADWAY AP	PT 8F		09 11 2010
	City	State	Zip Code	Transaction ID: INC.A.87121
	NEW YORK	NY	10024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CRE	n EATIVE DEVELOPMENT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
_ В.	Full Name (Last, First, Middle Initial) MARY JANE WISEMAN			Date of Receipt
J.	Mailing Address 33 KNOLL ROAD			M M / D D / Y Y Y Y Y O D D / 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.87211
	WAYNE	NJ	07470	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP NURS	n SING SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- C.	Full Name (Last, First, Middle Initial) MR MICHAEL WISNIEWSKI			Date of Receipt
•	Mailing Address 23 DRUID HILL DR			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City PARSIPPANY	State NJ	Zip Code 07054	Transaction ID: INC.A.86995  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07004	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CONTRACT ADMINISTRATI	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			75.00

SCHEDULE A (FE ITEMIZED RECEIF	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 207 / 438 (check only one)    X
or for commercial purposes,  NAME OF COMMITTEE	other than using the name and (In Full)	may not be sold or used by any perso address of any political committee to L ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions solicit contributions from such committee.  . Medco Health PAC)
Full Name (Last, First, Mi MR STEPHEN WOGEN Mailing Address 145 V			Date of Receipt
City TOWACO	State NJ	Zip Code 07082	Transaction ID: INC.A.86717  Amount of Each Receipt this Period
FEC ID number of contrib federal political committee	<u>.</u>		50.00
Name of Employer MEDCO HEALTH SOLU  Receipt For:  Primary  Other (specify) ▼	1206 E	ation FINANCIAL & ANALYTICAL SV gate Year-to-Date  1000.00	c ]
Full Name (Last, First, Mi MRS ELISSA WOJTOWIC: Mailing Address 43 AZ	Z, RPH		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	•	Transaction ID: INC.A.86600
PISCATAWAY  FEC ID number of contrib federal political committee		08854	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLU	SR DII	R RRA	
Receipt For:  Primary G  Other (specify) ▼	Aggreg Aggreg	gate Year-to-Date  600.00	
Full Name (Last, First, Mi MRS TARA WOLCKENHA			Date of Receipt
Mailing Address 1730	DOGWOOD CREEK DRIV	/E	0 9 1 1 2 0 1 0
City	State		Transaction ID: INC.A.86795
GERMANTOWN  FEC ID number of contrib federal political committee		38139	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GF	ROUP Occupa GROL	ation JP VP HR	
Receipt For:  Primary  Other (specify) ▼	Aggreg	ate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts Th	is Page (optional)		130.00

City State Zip Code TX 76016  ARLINGTON TX 76016  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	HEDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 208 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
AL MS CYNTHIA WOOD  Mailling Address 4002 FALCON LAKE DR  City State Zip Code TX 76016  FEC ID number of contributing federal political committee.  Name of Employer Other (Last, First, Middle Initial)  MS JUDITH WOOD  Mailing Address 76 COLONIAL ROAD  City State Zip Code Tyling State	commercial purposes, other than using the name.  AME OF COMMITTEE (In Full)	ne and address of any political committee to so	olicit contributions from such committee.
City State Zip Code TX 76016  ARLINGTON 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)  Malling Address 76 COLONIAL ROAD  City State Zip Code NY 12170  Perceipt For: Primary General Other (specify) ▼  State Zip Code NY 12170  Transaction ID: INC.A.868  Amount of Each Receipt this  Date of Receipt  N	S CYNTHIA WOOD		M M / D D / Y Y Y Y
State   Zip Code	RLINGTON	TX 76016	Transaction ID: INC.A.86916  Amount of Each Receipt this Period
Receipt For:	deral political committee.		25.00
MS JUDITH WOOD  Mailing Address 76 COLONIAL ROAD  City State Zip Code STILLWATER NY 12170  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) BRENDA WRIGHT  Mailing Address 1834 HUNTERS CREEK DRIVE  City State Zip Code Transaction ID: INC.A.863  Amount of Each Receipt this  Date of Receipt Transaction ID: INC.A.863  Transaction ID: INC.A.863  Amount of Each Receipt this  Date of Receipt Transaction ID: INC.A.873  Transaction ID: INC.A.873  Transaction ID: INC.A.873  Amount of Each Receipt this  City State Zip Code GERMANTOWN TN 38138  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General  Occupation DIR HEALTH OUTCOMES  Receipt For: Primary General	eceipt For: Primary General	Aggregate Year-to-Date ▼	
City State Zip Code NY 12170  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  City State Zip Code Transaction ID: INC.A.863  Amount of Each Receipt this  Date of Receipt  Primary General Sound  Date of Receipt  Transaction ID: INC.A.863  Transaction ID: INC.A.863  Amount of Each Receipt this  Date of Receipt  Transaction ID: INC.A.863  Transaction ID: INC.A.863  Transaction ID: INC.A.863  Transaction ID: INC.A.863  Transaction ID: INC.A.863  Transaction ID: INC.A.863  Transaction ID: INC.A.87  Transaction ID: INC.A.87  Amount of Each Receipt this  Transaction ID: INC.A.87  Amount of Each Receipt this  Primary General Occupation DIR HEALTH OUTCOMES  Receipt For: Primary General Occupation DIR HEALTH OUTCOMES  Aggregate Year-to-Date ▼	S JUDITH WOOD		M M / D D / Y Y Y Y
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) BRENDA WRIGHT  Mailing Address 1834 HUNTERS CREEK DRIVE  City State Zip Code Transaction ID: INC.A.87' GERMANTOWN TN 38138  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  Occupation DIR HEALTH OUTCOMES  Aggregate Year-to-Date ▼	•	-	Transaction ID: INC.A.86988
Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  BRENDA WRIGHT  Mailing Address 1834 HUNTERS CREEK DRIVE  City  State Zip Code  GERMANTOWN  TN 38138  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary  General  Aggregate Year-to-Date ▼  Occupation  DIR HEALTH OUTCOMES  Aggregate Year-to-Date ▼	EC ID number of contributing		Amount of Each Receipt this Period 25.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) BRENDA WRIGHT Mailing Address 1834 HUNTERS CREEK DRIVE  City State Zip Code GERMANTOWN TN 38138  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General  Date of Receipt  M M M / D D D / Y  Transaction ID: INC.A.87  Amount of Each Receipt this		SR DIR ACCT MGMT OPS	
BRENDA WRIGHT  Mailing Address 1834 HUNTERS CREEK DRIVE  City State Zip Code  Transaction ID: INC.A.87  GERMANTOWN TN 38138  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  Date of Receipt  Transaction ID: INC.A.87  Amount of Each Receipt this	Primary General		
City State Zip Code Transaction ID: INC.A.87  GERMANTOWN TN 38138  FEC ID number of contributing federal political committee.  C  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  O 9 1 1  Transaction ID: INC.A.87  Amount of Each Receipt this  Occupation DIR HEALTH OUTCOMES	RENDA WRIGHT		Date of Receipt
GERMANTOWN  TN 38138  Amount of Each Receipt this  FEC ID number of contributing federal political committee.  C  Name of Employer ACCREDO HEALTH GROUP  DIR HEALTH OUTCOMES  Receipt For:  Primary General  Amount of Each Receipt this	ailing Address 1834 HUNTERS CREEK [	PRIVE	
FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  C  Occupation DIR HEALTH OUTCOMES  Aggregate Year-to-Date ▼			Transaction ID: INC.A.87191
Receipt For:  Primary General  Aggregate Year-to-Date ▼	EC ID number of contributing		25.00
Primary General		•	
	Primary General		
SUBTOTAL of Receipts This Page (optional)	TOTAL of Receipts This Page (optional)		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 209 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	he name and ado	lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC.	. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR SERGEY YANITSKIY			Date of Receipt
Mailing Address 793 LINCOLN AVE			09 11 2010
City	State	Zip Code	Transaction ID: INC.A.86664
POMPTON LAKES	NJ	07442	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) MS SARAH YINGLING			Date of Receipt
Mailing Address 901 ST MARKS 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.86796
WESTFIELD	NJ	07090	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR N	MEDICARE OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR			Date of Receipt
Mailing Address 219 SPOOK ROCK I	RD.		0 9 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.86887
SUFFERN	NY	10901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & CI	HIEF INFO OFFICER	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
SUBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 210 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JILL ZELMAN Mailing Address 43604 EMERALD DU  City LEESBURG FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State VA  C  Occupation SR DIR (	CONSOLIDATION PLAN  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
Other (specify)  Full Name (Last, First, Middle Initial) ANATOLY ZHELEZNYAK Mailing Address 5 DENISE COURT  City MANALAPAN FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C	Zip Code 07726	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary  Other (specify)  Full Name (Last, First, Middle Initial)  MR JAMES ZIRPOLI  Mailing Address 6691 DEERVIEW DR  City  LOVELAND	Aggregate	Zip Code 45140	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 1 1 1 2 0 1 0  Transaction ID: INC.A.86764  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation VP/GM Aggregate	n e Year-to-Date ▼ 975.00	25.00
SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line number		•	75.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 211 / 438 (check only one)    X
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) IEDCO HEALTH SOLUTIONS INC. F	name and add	lress of any political committee to	o solicit contributions from such committee.
. <u>M</u>	ull Name (Last, First, Middle Initial) R ANTHONY ZOLFO ailing Address 726 HIGH MOUNTAIN	I ROAD		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ci <u>F</u>	ty RANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.87064  Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		25.00
	ame of Employer EDCO HEALTH SOLUTIONS eceipt For:	Occupation ASST CC	DUNSEL	
n.e	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
. <u>S/</u>	ull Name (Last, First, Middle Initial) ANDRA TAFURI ailing Address 803 ALBEMARLE STR	REET		Date of Receipt
Ci	•	State	Zip Code	0 9 1 6 2 0 1 0 Transaction ID: INC.A.86528
FE	/YCKOFF  EC ID number of contributing deral political committee.	NJ C	07481	Amount of Each Receipt this Period 650.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupation	n ATTORNEY	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	]
	ull Name (Last, First, Middle Initial) S MICHELE AGNEW			Date of Receipt
	ailing Address 2433 ANDERSON PAR	RK DRIVE		0 9 1 8 2 0 1 0
Ci H	ty ENDERSON	State NV	Zip Code 89044	Transaction ID: INC.A.87301  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	С		12.50
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupation DIR HR	ı	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 487.50	
SUB	TOTAL of Receipts This Page (optional)	1		687.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 212 / 438 (check only one)    X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and ad	dress of any political committee to	o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) MS CARMEN BERG Mailing Address P O BOX 1373  City MEDICAL LAKE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State WA C	Zip Code 99022	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
В.	Full Name (Last, First, Middle Initial) MR ANDREW BIDINOTTO Mailing Address 7728 GRACE DRIVE			Date of Receipt    M
	City	State	Zip Code	Transaction ID: INC.A.87337
	NORTH RICHLAND HIL  FEC ID number of contributing federal political committee.	C	76182	Amount of Each Receipt this Period  12.50
	Name of Employer MEDCO HEALTH SOLUTIONS		SS PROCESS CHAMPION	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
C.	Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO			Date of Receipt
	Mailing Address 26 DAYLILY DRIVE			0 9 1 8 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87822
	MOUNT LAUREL FEC ID number of contributing federal political committee.	NJ C	08054	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP HR	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 625.00	
	SUBTOTAL of Receipts This Page (optional)			50.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 213 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any per ng the name and address of any political committee NC. POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 6527 SHORBUR	GH DRIVE	Date of Receipt
City	State Zip Code	0 9 1 8 2 0 1 0  Transaction ID: INC.A.87282
INDIANAPOLIS  FEC ID number of contributing federal political committee.	IN 46278	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation DIR PHARM PRACTICE  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	975.00	
Full Name (Last, First, Middle Initial) MS BARBARA CARIGAN Mailing Address 5589 W. TECO A	VE.	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City LAS VEGAS	State Zip Code NV 89118	Transaction ID: INC.A.87813
FEC ID number of contributing federal political committee.	NV 89118	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  975.00	
Full Name (Last, First, Middle Initial) MR MARVEN CHIN	I	Date of Receipt
Mailing Address 1604 SNOWBEF	RY DR.	0 9 1 8 2 0 1 0
City WILLIAMSTOWN	State Zip Code NJ 08094	Transaction ID: INC.A.87801  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR QUALITY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 487.50	
SUBTOTAL of Receipts This Page (optic	onal)	62.50

ITEMIZED RECEIPTS	λ)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and add	η not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MRS MARLENE CLEMENT Mailing Address 42 MESQUITE VILI	AGE CIR		Date of Receipt
City	State	Zip Code	0 9 1 8 2 0 1 0 Transaction ID: INC.A.87492
HENDERSON FEC ID number of contributing federal political committee.	C	89012	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUS		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MR JASON COLE			Date of Receipt
Mailing Address 14917 E BELLA VIS	State	Zip Code	0 9 1 8 2 0 1 0
VERADALE	WA	99037	Transaction ID: INC.A.87508  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 975.00	
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
Mailing Address 4156 DUNMORE D	RIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LAKE WALES	State FL	Zip Code 33859	Transaction ID: INC.A.87595  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 975.00	
SUBTOTAL of Receipts This Page (optiona	D		62.50

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 215 / 438 (check only one)    X   11a
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MR PATRICK DENNIS			Date of Receipt
	Mailing Address 2344 FRENCH ALPS	AVE.		09 18 2010
	City	State	Zip Code	Transaction ID: INC.A.87416
	HENDERSON	NV	89044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
_ s.	Full Name (Last, First, Middle Initial) MS TAMARA DIDYK			Date of Receipt
	Mailing Address 136 BEAVER RUN R	D		09 18 2010
	City	State	Zip Code	Transaction ID: INC.A.87570
	LAFAYETTE	NJ	07848	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ENT	n ERPRISE OPS	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		487.50	
_	Full Name (Last, First, Middle Initial) WILLIS DINGLE			Date of Receipt
	Mailing Address 905 SW SCRUB OAk	( AVE		09 18 2010
	City	State	Zip Code	Transaction ID: INC.A.87420
	PALM CITY	FL	34990	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	HR	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		400.00	
				125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 216 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pethe name and address of any political committee.  POLITICAL ACTION COMMITTEE (a.k.)	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS LYNDA DOREMUS	. 1 621116712 71611 66111111 1 1 2 (a.i.	Date of Receipt
Mailing Address 16 E HOMESTEAD	AVE	09 18 2010
City	State Zip Code	Transaction ID: INC.A.87541
COLLINGSWOOD  FEC ID number of contributing federal political committee.	NJ 08108	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation DIR PHARM PRACTICE Aggregate Year-to-Date ▼	
Other (specify)  Full Name (Last, First, Middle Initial)	500.00	Date of Descript
Mailing Address 106 HENRY SEWAL		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City <u>STUART</u>	State Zip Code FL 34996	Transaction ID: INC.A.87958  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 MARKETING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA		Date of Receipt
Mailing Address 2354 DOLPHIN CT		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y D D D / Y Y Y Y Y Y
City HENDERSON	State Zip Code NV 89074	Transaction ID: INC.A.87526  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1359.51	
SUBTOTAL of Receipts This Page (optional)	)	65.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 217 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any peen name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JOHN FORD  Mailing Address 6 SILVER LAKE DRIV  City SHAMONG  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 08088  C  Occupation DIR OPS  Aggregate Year-to-Date  585.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO  Mailing Address 9 GREEN HILL TRAIL  City TROPHY CLUB  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code TX 76262  C  Occupation SVP NATIONAL SERVICE CENTE Aggregate Year-to-Date  2896.10	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87599  Amount of Each Receipt this Period  100.00
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS Mailing Address 544 DENMOOR COU  City GALLOWAY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code OH 43119  C  Occupation DIR OPS  Aggregate Year-to-Date   487.50	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 18 2 0 1 0  Transaction ID: INC.A.87344  Amount of Each Receipt this Period  12.50
SUBTOTAL of Receipts This Page (optional)		127.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 218 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	r not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JOHN HOLLINGER			Date of Receipt
Mailing Address 784 CAPE HENRY	'DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COLUMBUS	State OH	Zip Code 43228	Transaction ID: INC.A.87582  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 BUS	INESS PLANNING	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) MR BERNARD HUKILL			Date of Receipt
Mailing Address 17219 CLOVIS			0 9 1 8 2 0 1 0
City HELOTES	State TX	Zip Code 78023	Transaction ID: INC.A.87633  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70025	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA		
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 1950.00	
Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
Mailing Address 12224 MONTCALM	M STREET		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CARMEL	State IN	Zip Code 46032	Transaction ID: INC.A.87662  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40052	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	١	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 975.00	
SUBTOTAL of Receipts This Page (options	al)		85.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 219 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ 4.	Full Name (Last, First, Middle Initial) MR DENNIS KACKLEY	OLITIOAL I	TOTION COMMITTEE (a.n.a	Date of Receipt
	Mailing Address 32 EAST RIVERGLEN	DR		0 9 / 1 8 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City WORTHINGTON	State OH	Zip Code 43085	Transaction ID: INC.A.87585  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUS		
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 487.50	
- 3.	Full Name (Last, First, Middle Initial) MR BRICE LOVE Mailing Address 2390 BRANDON RD			Date of Receipt
				09 / 18 / 2010
	City COLUMBUS	State OH	Zip Code 43221	Transaction ID: INC.A.87513  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	TOLL	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 487.50	
_ :.	Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
	Mailing Address 1066 WEST GROVE C	Т		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.87411  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/GM	n	7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1170.00	
	SUBTOTAL of Receipts This Page (optional)			55.00
	TOTAL This Period (last page this line number of	anly)	•	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 220 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	i. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) ROBERT MARK			Date of Receipt
	Mailing Address 1976 NE RIVER COUR	RT		09 18 2010
	City JENSEN BEACH	State FL	Zip Code 34957	Transaction ID: INC.A.87950  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	04007	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP & CH	n IIEF SALES OFFICER	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
- В.	Full Name (Last, First, Middle Initial) MR EDWARD MCNEILEY Mailing Address 2623 KENCHESTER L	OOP		Date of Receipt
		09 18 2010		
	City WESLEY CHAPEL	State FL	Zip Code 33543	Transaction ID: INC.A.87459  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00040	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n RM PRACTICE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
- С.	Full Name (Last, First, Middle Initial) PHILLIP MONACO			Date of Receipt
	Mailing Address 835 NE STOKES TERI	R		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City JENSEN BEACH	State FL	Zip Code	Transaction ID: INC.A.87953
	FEC ID number of contributing federal political committee.	C	34957	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n RMACY PRACTICES	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			87.50
ļ	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 221 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any persod dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) KEVIN NESS			Date of Receipt
	Mailing Address 3872 SW RAMSPECK		7:a Coda	0 9 1 8 2 0 1 0 2 0 1 0
	City PORT ST. LUCIE	State FL	Zip Code 34953	Transaction ID: INC.A.87949  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio LEAD SO	n DLUTIONS ARCHITECT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- В.	Full Name (Last, First, Middle Initial) MR BRYAN OLENIK Mailing Address 652 F. DEVON DRIVE			Date of Receipt
	Mailing Address 653 E. DEVON DRIVE			09 18 2010
	CHREDT	State	Zip Code	Transaction ID: INC.A.87679
	GILBERT  FEC ID number of contributing federal political committee.	C	85296	Amount of Each Receipt this Period  12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n IRM PRACTICE	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 450.00	
- С.	Full Name (Last, First, Middle Initial) MR JUN PARK			Date of Receipt
	Mailing Address 2843 HONEYSUCKLE	LANE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City HILLIARD	State OH	Zip Code	Transaction ID: INC.A.87795
	FEC ID number of contributing federal political committee.	C	43026	Amount of Each Receipt this Period  12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio BUSINES	n SS PROCESS CHAMPION	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
	SUBTOTAL of Receipts This Page (optional)			50.00
	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>K</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 222 / 438 (check only one)    X		
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS Mailing Address 2780 FOLKSTONE  City COLUMBUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State OH C Occupatio VP/GM	Zip Code 43220	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 975.00	]		
ARLENE PERAZELLA	Full Name (Last, First, Middle Initial) ARLENE PERAZELLA Mailing Address 600 NE BAYBERRY LANE				
City  JENSEN BEACH  FEC ID number of contributing federal political committee.	State FL	Zip Code 34957	Transaction ID: INC.A.87947  Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		DPERATIONS Year-to-Date ▼ 250.00	]		
Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL			Date of Receipt  0 9 1 8 2 0 1 0		
City KELLER FEC ID number of contributing federal political committee.	State TX	Zip Code 76248	Transaction ID: INC.A.87770  Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR HR Aggregate	Year-to-Date ▼ 975.00			
SUBTOTAL of Receipts This Page (optional	al)		100.00		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 223 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS JENNIFER ROBERTS Mailing Address 1342 DALTON CT			Date of Receipt  0 9 1 8 2 0 1 0
City FAIRFIELD FEC ID number of contributing	State OH	Zip Code 45014	Transaction ID: INC.A.87414  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	Occupatio DIR OPS		12.50
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) CHRISTOPHER RYAN Mailing Address 7690 HUMMINGBIR	D COURT		Date of Receipt  0 9 1 8 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87952
WEST PALM BEACH FEC ID number of contributing federal political committee.	C	33412	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR FINA		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) HENRIK SANDELL	<b>'</b>		Date of Receipt
Mailing Address 363 GRAPEVINE RO	DAD		09 18 2010
City WENHAM	State MA	Zip Code	Transaction ID: INC.A.87951
FEC ID number of contributing federal political committee.	C	01984	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MAR		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
	-		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 224 / 438   (check only one)
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III			Date of Receipt
	Mailing Address 1767 FAIRMOUNT ST	TREET		09 18 2010
	City CARMEL	State IN	Zip Code 46032	Transaction ID: INC.A.87562
	FEC ID number of contributing federal political committee.	C	40032	Amount of Each Receipt this Period  30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ONC	n OLOGY TRC OPS	
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1800.00	
	Full Name (Last, First, Middle Initial) MR ERIC SMITHER			Date of Receipt
	Mailing Address 1132 NORTH ST RT	123		0 9 / 1 8 / Y Y Y Y Y Y
	City LEBANON	State OH	Zip Code 45036	Transaction ID: INC.A.87421  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10000	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR OPS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE			Date of Receipt
	Mailing Address 6108 HUNTER 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.87588
	COLLEYVILLE FEC ID number of contributing federal political committee.	C	76034	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 975.00	
	UBTOTAL of Receipts This Page (optional)	1		67.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 225 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt
	Mailing Address 8362 GOLDEN PRAI	RIE DRIVE		09 18 2010
	City	State	Zip Code	Transaction ID: INC.A.87441
	TAMPA	<u>FL</u>	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		1775.00	
В.	Full Name (Last, First, Middle Initial) TIM TIDD	1		Date of Receipt
	Mailing Address 10302 S FEDERAL H PO BOX 266			09 18 2010
	City PORT ST LUCIE	State FL	Zip Code 34952	Transaction ID: INC.A.87549
	FEC ID number of contributing federal political committee.	C	34332	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM I	n PATIENT SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
_ C.	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE			Date of Receipt
	Mailing Address 5 APPLE ORCHARD	RD		0 9 1 8 2 0 1 0
	City MOORESTOWN	State NJ	Zip Code 08057	Transaction ID: INC.A.87574  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00037	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1950.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
H	TOTAL This Period (last page this line numbe			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 226 / 438 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	he name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES ZIRPOLI Mailing Address 6691 DEERVIEW DF  City LOVELAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State OH C Occupation VP/GM	Zip Code 45140  n e Year-to-Date ▼ 975.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87483  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR THOMAS ABSON Mailing Address 57 SYCAMORE DRI  City WALDWICK FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupation DIR FOR	Zip Code 07463  n RMULARY & COVERAGE Me e Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87423  Amount of Each Receipt this Period  25.00  GMT
Full Name (Last, First, Middle Initial) MS LESLIE ACHTER Mailing Address 821 ALBEMARLE ST  City WYCKOFF  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupation VP ANAL	Zip Code 07481 n LYTICAL 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
SUBTOTAL of Receipts This Page (optional)			100.00

	LE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 227 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commer  NAME OF	on copied from such Reports and Stacial purposes, other than using the r COMMITTEE (In Full) HEALTH SOLUTIONS INC. Po	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.  . Medco Health PAC)
Full Name MR EDWAI Mailing Add City BRIDGEV FEC ID nu federal poli Name of E MEDCO H Receipt Fo	(Last, First, Middle Initial) RD ADAMCIK  dress 1021 SUNSET RIDGE  WATER  mber of contributing itical committee.  mployer HEALTH SOLUTIONS  or: ary General	State NJ C Occupation VP PHAR	Zip Code 08807	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 2 5 2 0 1 0  Transaction ID: INC.A.87315  Amount of Each Receipt this Period  50.00
Full Name  DIANE ADA	dress 34 THOMAS ST.	State NJ	Zip Code 07006	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
FEC ID nu federal poli  Name of EMEDCO H  Receipt Fo	mber of contributing itical committee.  mployer HEALTH SOLUTIONS	Occupation SR DIR B		Amount of Each Receipt this Period  25.00
C. MR STEPH Mailing Add City WARWIC		RD State NY	Zip Code 10990	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt Fo		-	TECHNOLOGY  e Year-to-Date ▼  1000.00	
SUBTOTAL	of Receipts This Page (optional)			125.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 228 / 438 (check only one)    X
7	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) MS KELLY AGNEW	OLITIOAL I	HOTTON COMMITTEE (a.K.a	Date of Receipt
н.	Mailing Address 1360 N. SANDBURG T #1602	ERRACE		0 9 2 5 2 0 1 0
	City CHICAGO	State IL	Zip Code	Transaction ID: INC.A.87328
	FEC ID number of contributing federal political committee.	C	60610	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	on CCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) MS MICHELE AGNEW Mailing Address 2433 ANDERSON PAF	RK DRIVE		Date of Receipt
				09 25 2010
	City HENDERSON	State NV	Zip Code 89044	Transaction ID: INC.A.87302  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	03044	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	]
- ).	Full Name (Last, First, Middle Initial) JANET ALEXANDER			Date of Receipt
	Mailing Address 32 WEST 83RD STRE APT #2	ET		0 9 2 5 2 0 1 0
	City NEW YORK	State NY	Zip Code	Transaction ID: INC.A.87867
	FEC ID number of contributing federal political committee.	C	10024	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	on CCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
ſ	SUBTOTAL of Receipts This Page (optional)			62.50
	TOTAL This Period (last page this line number of	only)	•	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 229 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JEFFREY ALEXANDER Mailing Address 4 DEERPOND CT  City FLEMINGTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C		Date of Receipt  0 9 25 2010  Transaction ID: INC.A.87434  Amount of Each Receipt this Period  15.00
Receipt For: Primary General Other (specify)		FECHNOLOGY  • Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial) DR JODY ALLEN Mailing Address 3031 MOUNT HILL D  City MIDLOTHIAN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State VA  C Occupation	Zip Code 23113	Date of Receipt    M M M
Receipt For: Primary General Other (specify)		ICAL POLICY-GOV AFFAIR  Year-to-Date ▼  1000.00	<u>s</u>
MR JAMES ALLOCCO  Mailing Address 19 ROSS ROAD  City  SCARSDALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)		Zip Code 10583  n TECHNOLOGY Year-to-Date ▼ 1000.00	Date of Receipt    M M
SUBTOTAL of Receipts This Page (optional)	1		115.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 230 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) DUNSTON ALMEIDA			Date of Receipt
	Mailing Address 225 5TH AVENUE 10R			09 25 7 2010
	City NEW YORK	State NY	Zip Code 10010	Transaction ID: INC.A.87889  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 INTERNATL BUSINESS DE'	v
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00	
- В.	Full Name (Last, First, Middle Initial) TEJWANSH ANAND	1		Date of Receipt
	Mailing Address 10 WHIPPOORWILL	LAKE ROAD	)	09 25 2010
	City CHAPPAQUA	State NY	Zip Code	Transaction ID: INC.A.87766
	FEC ID number of contributing federal political committee.	C	10514	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	n ) TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	]
С. С.	Full Name (Last, First, Middle Initial) MRS LAUREN ANTONELLI			Date of Receipt
	Mailing Address 64 CUPSAW DRIVE			M M / D D / Y Y Y Y Y O D D / Y 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.87518  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07430	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	DDUCT MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		100.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 231 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS JAYME ANTONOPLOS			Date of Receipt
Mailing Address 48 WITTE ROAD			09 25 2010
City HEWITT	State NJ	Zip Code 07421	Transaction ID: INC.A.87594  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07421	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR EXE		
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI	<u> </u>		Date of Receipt
Mailing Address 20 CHADWELL PL	ACE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.87523
FEC ID number of contributing federal political committee.	C	07900	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CO		
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) DENNIS AUCH			Date of Receipt
Mailing Address 1981 E. COVEY VI	EW COURT		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SALT LAKE CITY	State UT	Zip Code 84106	Transaction ID: INC.A.87919  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	04100	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIM	n IBURSEMENT	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	(le		100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 232 / 438 (check only one)    X   11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) WILLIAM AX			Date of Receipt
	Mailing Address 1607 STODDARD ST			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87930
	ROCKFORD	IL	61108	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation AVP SAI	on LES-HEMOPHILIA	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) MS CHARLOTTE BABCOCK			Date of Receipt
	Mailing Address 2636 SHAKER RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.87894
	CLEVELAND HEIGHTS	OH	44118	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	on CCT EXEC	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
С.	Full Name (Last, First, Middle Initial) ERIK BAGIN	<u> </u>		Date of Receipt
	Mailing Address 73 HIGHLAND AVENI	JE		09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87809
	GLEN RIDGE	NJ	07028	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	on	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 233 / 438 (check only one)    X
NAME OF COMMITTEE (In Full)	ts and Statements may not be sold or used by any persousing the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	SINC. POLITICAL ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS BECKIE BARATKO  Mailing Address 80 N. WOODL	AND STREET	Date of Receipt
City ENGLEWOOD	State Zip Code NJ 07631	Transaction ID: INC.A.87684  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROPOSAL UNIT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR THOMAS BARATTA		Date of Receipt
Mailing Address 69 SKYLINE D	3	0 9 2 5 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.87604
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 INFO TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR THOMAS BARDZELL		Date of Receipt
Mailing Address 77 HIGHLAND	AVE	M M / D D / Y Y Y Y Y O D D / 25 2010
City MIDLAND PARK	State Zip Code NJ 07432	Transaction ID: INC.A.87741  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	tional)	125.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 234 / 438 (check only one)    X   11a
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	e name and add	dress of any political committee to	o solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) MS ROBYN BARILLARI Mailing Address 3 DELANEY COURT  City BRIDGEWATER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General		Zip Code 08807 on DICARE OPS o Year-to-Date ▼	Date of Receipt    M M M
3.	Other (specify) ▼  Full Name (Last, First, Middle Initial) JANE BARLOW  Mailing Address 3 AVALON COURT  City  HOPEWELL JUNCTION  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NY C	Zip Code 12533	Date of Receipt  M M M / D D / Y Y Y Y Y  0 9 25 2010  Transaction ID: INC.A.87855  Amount of Each Receipt this Period  50.00
 C.	Receipt For:  Primary General Other (specify)   Full Name (Last, First, Middle Initial) MR MICHAEL BARONE  Mailing Address 452 MEDWAY ROAD	Aggregate	CAL POLICIES  Year-to-Date ▼  1000.00	Date of Receipt
	City HIGHLAND HEIGHTS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State OH C Occupation SVP & G	Zip Code 44143  n ENERAL MGR e Year-to-Date  3840.00	Transaction ID: INC.A.87895  Amount of Each Receipt this Period  192.00
SI	JBTOTAL of Receipts This Page (optional)			272.00

City State Zip Code EMERSON NJ 07630  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  State Zip Code Transaction ID: INC.A.87757  Amount of Each Receipt this Period  25.00  Transaction ID: INC.A.87757  Amount of Each Receipt this Period  25.00  Full Name (Last, First, Middle Initial)		SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 235 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
A. Full Name (Last, First, Middle Initial) Malling Address 1813 ADONIS AVE  City State Zip Code HENDERSON NV 89074  FEC ID number of contributing federal political committee.  Name of Employer Amount of Each Receipt this Period  FEL ID number of contributing federal political committee.  Pull Name (Last, First, Middle Initial)  JAMES BECKER Malling Address 35 BIRCH STREET  City State Zip Code Pull Name (Last, First, Middle Initial)  JAMES BECKER Malling Address 35 BIRCH STREET  City State Zip Code NJ 07630  FEC ID number of contributing federal political committee.  Name of Employer MEDOD HEALTH SOLUTIONS  Receipt For: Other (specity) ▼ 1160.00  Discupation	\ \ \	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	solicit contributions from such committee.
City State Zip Code NV 89074    HENDERSON   NV 89074	<b>A</b> .	Full Name (Last, First, Middle Initial) MR DAVID BAUGH			Date of Receipt
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:    Primary   General     City   State   Zip Code     Name of Employer     MEDCO HEALTH SOLUTIONS     Primary   General     City   State   Zip Code     Name of Employer     MEDCO HEALTH SOLUTIONS     Receipt For:     Primary   General     Other (specify) ▼     Date of Receipt     Name of Employer     Aggregate Year-to-Date ▼     Transaction ID: INC.A.87757     Amount of Each Receipt this Period     Aggregate Year-to-Date ▼     Date of Receipt     Name of Employer     Aggregate Year-to-Date ▼     Date of Receipt     Name of Employer     Aggregate Year-to-Date ▼     Date of Receipt     Name of Employer     Aggregate Year-to-Date ▼     Date of Receipt     Name (Last. First. Middle Initial)     Name of Employer     Name (Last. First. Middle Initial)     Name of Employer     Name (Last. First. Middle Initial)     Name of Employer	HENDERSON	NV	•	Transaction ID: INC.A.87749  Amount of Each Receipt this Period	
B.		Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation MGR BE	NEFIT DELIVERY SYSTEM e Year-to-Date ▼  1160.00	
EMERSON  NJ 07630  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer MEDOC HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Other (specify) ▼  Occupation DIR ENTERPRISE BUSINESS INTELL  Aggregate Year-to-Date ▼  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction ID: INC.A.87848  Transaction ID: INC.A.87848  Amount of Each Receipt this Period  Transaction I	— В.	JAMES BECKER			M M / D D / Y Y Y Y
Receipt For:		EMERSON FEC ID number of contributing	NJ	•	Amount of Each Receipt this Period
C. Full Name (Last, First, Middle Initial)  MR DONALD BELFER  Mailing Address 1270A VALLEY ROAD  City State Zip Code WAYNE NJ 07470  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  109 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Receipt For: Primary General	DIR ENT	TERPRISE BUSINESS INTEL e Year-to-Date ▼	
City WAYNE NJ 07470  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify) ▼  State Zip Code NJ 07470  C  C  C  C  C  C  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  102.00	_ C.	Full Name (Last, First, Middle Initial) MR DONALD BELFER			M M / D D / Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  Occupation SR DIR BUSINESS ANALYSIS  Aggregate Year-to-Date  Other (specify) ▼  Aggregate Year-to-Date  375.00		WAYNE	NJ	·	Transaction ID: INC.A.87848  Amount of Each Receipt this Period
Primary General Other (specify) ▼ 375.00			Occupation		25.00
SUBTOTAL of Receipts This Page (optional)		Primary General	Aggregate		
		SUBTOTAL of Receipts This Page (optional)		······	108.00

SCHEDULE A	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUM (check only one)  X 11a 1 13 1	1b  11c  12
Any information copi or for commercial pu	rposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of	f soliciting contributions
MEDCO HEAL	TH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health I	PAC)
MR STEPHEN BE	First, Middle Initial) LL 24 GLENWOOD ROA	D		Date of Rece	ipt 25 2010
City UPPER SADD	LE RIVER	State NJ	Zip Code 07458		ID: INC.A.87769 ach Receipt this Period
FEC ID number of federal political co		C			50.00
Name of Employe MEDCO HEALT	er H SOLUTIONS	Occupation VP FINA			
Receipt For: Primary Other (spec	General <b>General</b>	Aggregate	e Year-to-Date ▼ 1000.00		
MS FRANCINE BE				Date of Rece	·
	2981 NORTHWEST B	LVD		0 9	25 2010
City <u>UPPER ARLIN</u>	IGTON	State OH	Zip Code 43221		ID: INC.A.87446 ach Receipt this Period
FEC ID number of federal political co	of contributing	C		7 III Out to Le	25.00
Name of Employe MEDCO HEALT	er H SOLUTIONS	Occupation SR DIR (	n CLINICAL SVCS		
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 375.00		
Full Name (Last, MS THERESA BE Mailing Address	First, Middle Initial) NSHOOF 1332 SE 78TH ST			Date of Rece	ipt
	1002 02 7011101	Ctata	7in Codo	0 9	25 2010
City <u>RUNNELLS</u>		State IA	Zip Code 50237		ID: INC.A.87454 ach Receipt this Period
FEC ID number of federal political co		C			25.00
Name of Employe MEDCO HEALT	er H SOLUTIONS	Occupation NATL AC	n CCT EXEC		
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 500.00		
SUBTOTAL of Rec	eipts This Page (optional)				100.00
TOTAL This Period	I (last page this line number	only)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 237 / 438 (check only one)    X
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal statements and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MARYBETH BERENGUER Mailing Address 2 WEXLER CT  City GARNERVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10923  C  Occupation DIR CLINICAL PRODUCT MGMT  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: INC.A.87621  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  MS CARMEN BERG  Mailing Address P O BOX 1373  City  MEDICAL LAKE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code WA 99022  C  Occupation DIR PHARM PRACTICE  Aggregate Year-to-Date   487.50	Date of Receipt  M M M / D D / 2 5 / 2 0 1 0  Transaction ID: INC.A.87672  Amount of Each Receipt this Period  12.50
Full Name (Last, First, Middle Initial) JEAN BERGWALL Mailing Address 2546 HOLLYHOCK  City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code TN 38138  C  Occupation DIR PRODUCT LINE II  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / 2 5 / 2 0 1 0  Transaction ID: INC.A.87944  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)		62.50

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	(X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 238 / 438 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	ng the name and addr	ess of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS STACEY BERNSTEIN  Mailing Address 166 BERKELEY F	PLACE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  GLEN ROCK  FEC ID number of contributing	State NJ	Zip Code 07452	Transaction ID: INC.A.87826  Amount of Each Receipt this Period
Receipt For:  Primary  Other (specify)  General	Occupation ASST COL Aggregate V	UNSEL ∕ear-to-Date ▼ 430.00	25.00
Full Name (Last, First, Middle Initial) MR DAVID BERRY Mailing Address 11 COBBLESTON	NE LANE	0 0 0 0 0 0 0	Date of Receipt  0 9 2 5 2 0 1 0
City RAMSEY  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07446	Transaction ID: INC.A.87602  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR TECH Aggregate Y	INOLOGY √ear-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial) INDERPAL BHANDARI Mailing Address 220 ARDSLEY RO	DAD		Date of Receipt  0 9 2 5 2 0 1 0
City SCARSDALE  FEC ID number of contributing federal political committee.	State NY	Zip Code 10583	Transaction ID: INC.A.87835  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINIC	CAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 239 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS EILEEN BIDELL Mailing Address 71 WASHINGTON C  City TOWACO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	CT.  State Zip Code NJ 07082  C  Occupation SR DIR PHARM OPS  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
Full Name (Last, First, Middle Initial) MR ANDREW BIDINOTTO Mailing Address 7728 GRACE DRIVE  City NORTH RICHLAND HIL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code TX 76182  C  Occupation BUSINESS PROCESS CHAMPION Aggregate Year-to-Date  487.50	Date of Receipt  M M C 25 2010  Transaction ID: INC.A.87338  Amount of Each Receipt this Period  12.50
Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS Mailing Address 4273 BROGDAN FA  City BUFORD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code GA 30518  C  Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	62.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 240 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may name 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.
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) CALVIN BINGHAM			Date of Receipt
Mailing Address 13702 W. 48TH ST.			09 25 7 2010
City	State	Zip Code	Transaction ID: INC.A.87920
SHAWNEE	KS	66216	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio DIR CLIN	n NICAL OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO			Date of Receipt
Mailing Address 26 DAYLILY DRIVE			M M / D D / Y Y Y Y Y Y Y O 9 25 2010
City	State	Zip Code	Transaction ID: INC.A.87823
MOUNT LAUREL	NJ	08054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP HR	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN			Date of Receipt
Mailing Address 4520 LINWOOD 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.87748
DEEPHAVEN	MN	55331	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP CLI	n ENT & MKT STRATEGIC DE	:v
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 241 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	POLITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS JESSICA BLANTON			Date of Receipt
Mailing Address 410 CORNELIA ST. #4	1		0 9 2 5 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87456
BOONTON	NJ	07005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PROI	POSAL DEPARTMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN			Date of Receipt
Mailing Address 50 NEW ENGLAND DF	R		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.87557
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 MKTIN	NG & PRODUCT DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) JAMES BLONDIN			Date of Receipt
Mailing Address 115 AUBURN MEADO\	WS 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.87928
FORISTELL	MO	63348	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation GENERAL	L MGR - MULTI BRANCH	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	100.00

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

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 242 / 438 (check only one)    X   11a
Ai	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR STEVEN BLOOM			Date of Receipt
	Mailing Address 17818 ARBOR GREEI	NE DR		09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87556
	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 FIEL		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	]
— 3.	Full Name (Last, First, Middle Initial) KEN BODMER			Date of Receipt
	Mailing Address P.O. BOX 381947			09 / 25 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.87646
	GERMANTOWN 550 ID a serif contribution	TN	38183	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer ACCREDO HEALTH GROUP		CCREDO HEALTH GROUP	INC
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3840.00	
 >.	Full Name (Last, First, Middle Initial) MR MICHAEL BOGDA	•		Date of Receipt
	Mailing Address 80 LEONA CT			09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City LEVITTOWN	State NY	Zip Code 11756	Transaction ID: INC.A.87751
	FEC ID number of contributing federal political committee.	C	11736	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
5	SUBTOTAL of Receipts This Page (optional)			267.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>A</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 243 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MRS HEATHER BONOME			Date of Receipt
Mailing Address 203 12TH STREET	T NE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87496
WASHINGTON  FEC ID number of contributing federal political committee.	C	20002	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA	I		Date of Receipt
Mailing Address 109 ARBOR PL			0 9 2 5 Y Y Y Y Y Y
City BRYN MAWR	State PA	Zip Code	Transaction ID: INC.A.87377
FEC ID number of contributing federal political committee.	C	19010	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX			Date of Receipt
Mailing Address 6527 SHORBURG	H DRIVE		M M / D D / Y Y Y Y Y O D O D O D O D O D O D O D O
City INDIANAPOLIS	State IN	Zip Code 46278	Transaction ID: INC.A.87283  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40270	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n RM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 975.00	
SUBTOTAL of Receipts This Page (option	al)	_	75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 244 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) RUSS BOURNE  Mailing Address 242 N HIGHLAND  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary Other (specify)	State TN C Occupation VP BUS Aggregate		Date of Receipt    M   M   D   D   D   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) MS SALLIE BOWDEN  Mailing Address 5259 FISHERCREST  City RICHMOND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State VA  C  Occupation VP FORM	Zip Code 23231  n MULARY CONSULTING Year-to-Date ▼ 4000.00	Date of Receipt  M M M D D D 25 2010  Transaction ID: INC.A.87694  Amount of Each Receipt this Period  200.00
Full Name (Last, First, Middle Initial) KAREN BOWE  Mailing Address 177 N. MILL ROAD  City HARRISBURG  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	<del>, '</del>	Zip Code 17112  n L CUST RELATIONS Year-to-Date ▼ 500.00	Date of Receipt    M M
SUBTOTAL of Receipts This Page (optional) .			250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 245 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to see POLITICAL ACTION COMMITTEE (a.k.a.	
Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN  Mailing Address 15 DAWN LANE  City RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07456  C  Occupation EXEC DIR STRAT PRODUCT MGMT Aggregate Year-to-Date  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR CHRISTOPHER BRADBURY Mailing Address 3 DEER HORN TRAIL  City UPPER SADDLE RIVER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07458  C  Occupation VP CARE ENHANCING SOLUTIONS Aggregate Year-to-Date  300.00	Date of Receipt  M M M D D D Z D Z D 1 D  Transaction ID: INC.A.87381  Amount of Each Receipt this Period  15.00
Full Name (Last, First, Middle Initial) MR KEITH BRADBURY Mailing Address 122 DERFUSS LN  City BLAUVELT  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10913  C  Occupation EXEC DIR DRUG INFO  Aggregate Year-to-Date ▼  475.00	Date of Receipt  M M M
SUBTOTAL of Receipts This Page (optional) .	<b></b>	90.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 246 / 438 (check only one)    X
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial)  MS PATRICIA BRANUM  Mailing Address 210 FROG HOLLOW	ROAD		Date of Receipt
	City COATESVILLE	State PA	Zip Code 19320	Transaction ID: INC.A.87673  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INFC	n & PROCESS ENGINEERIN	— IG
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
	Full Name (Last, First, Middle Initial) MR JOHN BRENNAN Mailing Address 2 CARMEN LANE	- <b>L</b>		Date of Receipt
	Vialing Address 2 CARIVIEN LAINE			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87794
	FLEMINGTON  FEC ID number of contributing federal political committee.	NJ C	08822	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP AUD		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
	Full Name (Last, First, Middle Initial) MR JAMES BREWER, III Mailing Address 1888 BROADHAVEN	DD		Date of Receipt
	TOO BROADIAVEN	DN		09 25 2010
	City MIDDLEBURG	State FL	Zip Code 32068	Transaction ID: INC.A.87520
	FEC ID number of contributing federal political committee.	C	32000	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			185.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 24// 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS LINDA BRIDGE			Date of Receipt
Mailing Address 136 BEECH ST			09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87471
BELLEVILLE  FEC ID number of contributing federal political committee.	NJ C	07109	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT/MEMBER COMM	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR PAUL BRISSON			Date of Receipt
Mailing Address 469 MANOR LANE			0 9 2 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PELHAM MANOR	State NY	Zip Code 10803	Transaction ID: INC.A.87461
FEC ID number of contributing federal political committee.	C	10005	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRC	n DDUCT DEVELOPMENT	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR RICHARD BROOKLER			Date of Receipt
Mailing Address 9 ROMARY COUR	Т		09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87340
GLEN ROCK FEC ID number of contributing federal political committee.	NJ C	07452	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	J(l		75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 248 / 438 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR GREGORY BROWN Mailing Address 1162 PLAINS ROA City	ND State	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
WALLKILL FEC ID number of contributing federal political committee.	C	12589	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del></del> '	ACCT MGMT  Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial) MR KENNETH BROWN Mailing Address 540 GIORDANO D	RIVE		Date of Receipt  0 9 2 5 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87374
YORKTOWN HEIGHTS	NY	10598	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer MEDCO HEALTH SOLUTIONS		ERPRISE BUS INTELLIGEN	CE
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	]
Full Name (Last, First, Middle Initial) STEVEN BROWN	•		Date of Receipt
Mailing Address 140 S GROVE PAR	RK		09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87922
MEMPHIS  FEC ID number of contributing federal political committee.	C	38117	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRC	n DDUCT LINE II	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)	<b>)</b>	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 249 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	Statements may not be sold or used by any per ename and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS VIVIAN BULGER  Mailing Address 120 EAST MAIN ST  City  WASHINGTONVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code NY 10992  C  Occupation SR DIR FINANCE  Aggregate Year-to-Date ▼  400.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) AMANDA BUNDY  Mailing Address 5812 SEVEN POINTS  City HERMITAGE  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	STRACE  State Zip Code TN 37076  C  Occupation VP REIMBURSEMENT  Aggregate Year-to-Date  1000.00	Date of Receipt  M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.87915  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) GEORGE BURNITE  Mailing Address 68 WOODLAND DRIV  City CHURCHVILLE  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code PA 18966  C  Occupation DIR SALES PLANNING  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  0 9 25 2010  Transaction ID: INC.A.87779  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)		95.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 250 / 438 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR KEVIN BURON Mailing Address 25 TIMBERLAND			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ALISO VIEJO FEC ID number of contributing	State CA	Zip Code 92656	Transaction ID: INC.A.87530  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	Occupation VP/GM Aggregate	n e Year-to-Date ▼	30.00
Primary General Other (specify)  Full Name (Last, First, Middle Initial) KAREN CALANDRO		1000.00	Date of Receipt
Mailing Address 306 FOREST LANE  City  SCHAUMBURG  FEC ID number of contributing federal political committee.	State IL	Zip Code 60139	Transaction ID: INC.A.87882  Amount of Each Receipt this Period  10.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼		A ACCT MGMT  Preserved to Year-to-Date   440.00	]
Full Name (Last, First, Middle Initial)  MRS DOREEN CALDER  Mailing Address 441 S ELM STREE	Т		Date of Receipt  0 9 2 5 2 0 1 0
City  MAYWOOD  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07607	Transaction ID: INC.A.87280  Amount of Each Receipt this Period  40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	DUCT DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
SUBTOTAL of Receipts This Page (optional	)		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 251 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
	d Statements may not be sold or used by any personant the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR FRANK CANNISTRARO Mailing Address 146 SEMINOLE AV	-	Date of Receipt
		0 9 2 5 2 0 1 0
City NEW MILFORD	State Zip Code NJ 07646	Transaction ID: INC.A.87387  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE	
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI		Date of Receipt
Mailing Address 119 WASHINGTON	AVENUE	0 9 2 5 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.87626
CHATHAM FEC ID number of contributing	NJ 07928	Amount of Each Receipt this Period
federal political committee.		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & CONTROLLER	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	3846.20	
Full Name (Last, First, Middle Initial) MR VICENTE CARIDE		Date of Receipt
Mailing Address 114 W 27 APT 3N		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NEW YORK	State Zip Code NY 10001	Transaction ID: INC.A.87674  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 USER EXPERIENCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional		229.81

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 252 / 438   (check only one)
Any information copied from or for commercial purposes,	such Reports and Statements may other than using the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE MEDCO HEALTH SC	(In Full) DLUTIONS INC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Mi MS BARBARA CARIGAN	ddle Initial)		Date of Receipt
Mailing Address 5589	W. TECO AVE.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State NV	Zip Code	Transaction ID: INC.A.87814
LAS VEGAS FEC ID number of contrib federal political committee	outing	89118	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLU	Occupation DIR HR	n	
Receipt For:  Primary  Other (specify) ▼		Year-to-Date ▼ 975.00	
Full Name (Last, First, Mi	ddle Initial)		Date of Receipt
	RDSONG PARKWAY		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ORCHARD PARK	State NY	Zip Code	Transaction ID: INC.A.87580
FEC ID number of contrib federal political committee	outing	14127	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLU	Occupation SR DIR I	n HLTH CARE OPS	
Receipt For:  Primary  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	]
Full Name (Last, First, Mi			Date of Receipt
Mailing Address 24 Sh			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ALLENDALE	State NJ	Zip Code 07401	Transaction ID: INC.A.87641
FEC ID number of contrik federal political committee	outing	07401	Amount of Each Receipt this Period  52.50
Name of Employer ACCREDO HEALTH GF	Occupation GROUP	n VP MARKET STRATEGY &	DEV
Receipt For:  Primary  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	
SUBTOTAL of Receipts Th	is Passe (settingst)		102.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 253 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) JOSEPH CASACCIA JR			Date of Receipt
Mailing Address 9788 LIPSEY CV			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.87601  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30139	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRC	n DFESSIONAL PRACTICES	
Receipt For:  Primary General  Other (specify) ▼	<del>-                                    </del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS CATHERINE CASALE			Date of Receipt
Mailing Address 16345 HEATHROW	V DRIVE		0 9 25 Y Y Y Y Y
City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.87704
FEC ID number of contributing federal political committee.	C	33047	Amount of Each Receipt this Period  13.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	e Year-to-Date ▼ 273.00	
Full Name (Last, First, Middle Initial) MR BARRY CESANEK			Date of Receipt
Mailing Address 5 LEXINGTON CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SHAMONG	State NJ	Zip Code 08088	Transaction ID: INC.A.87539  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00000	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optional	-10		50.50

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 254 / 438 (check only one)    X
	ny information copied from such Reports and sort for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial)  MR MARVEN CHIN  Mailing Address 1604 SNOWBERRY [	nr.		Date of Receipt
		J1 (.		09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87802
	WILLIAMSTOWN	NJ	08094	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR QUA		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		487.50	
	Full Name (Last, First, Middle Initial) HWEI-CHUNG CHOU			Date of Receipt
	Mailing Address 36 TANGLEWOOD H	OLLOW		09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87865
	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	- · · · · · · · · · · · · · · · · · · ·	CHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		500.00	
_	Full Name (Last, First, Middle Initial) MR RAYMOND CHUNG	•		Date of Receipt
	Mailing Address 186 CROWN POINT	RD.		0 9 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87807
	PARSIPPANY	NJ	07054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>, '</del>	H MGMT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
		1		

ITEMIZED REC	(FEC Form 3X) EEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 255 / 438   (check only one)
Any information copied or for commercial purpo	from such Reports and Statements noses, other than using the name and a	nay not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMIT MEDCO HEALTH	TEE (In Full) H SOLUTIONS INC. POLITICAL	_ ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, Fir MRS MARLENE CLE			Date of Receipt
Mailing Address 4	2 MESQUITE VILLAGE CIR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HENDERSON	State NV	Zip Code 89012	Transaction ID: INC.A.87493  Amount of Each Receipt this Period
FEC ID number of c	ontributing		12.50
Name of Employer MEDCO HEALTH S	Occupa  OCCUPA  DIR CU	tion JST SVC	
Receipt For: Primary Other (specify	General Aggrega	ate Year-to-Date ▼ 487.50	
Full Name (Last, Fir	st, Middle Initial)		Date of Receipt
	901 HIDDEN HILLS WAY		M M / D D / Y Y Y Y Y O D D / 25 2010
City CORONA	State CA	Zip Code 92882	Transaction ID: INC.A.87908  Amount of Each Receipt this Period
FEC ID number of of federal political com	ontributing	32002	25.00
Name of Employer ACCREDO HEALT	H GROUP Occupa	tion RAL MGR - MULTI BRANCH	
Receipt For: Primary Other (specify	General Aggrega	ate Year-to-Date ▼ 460.00	
Full Name (Last, Fir	st, Middle Initial)		Date of Receipt
-	4917 E BELLA VISTA		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City VERADALE	State WA	Zip Code 99037	Transaction ID: INC.A.87509  Amount of Each Receipt this Period
FEC ID number of of federal political com	ontributing	33007	25.00
Name of Employer MEDCO HEALTH S	Occupa VP/GM		
Receipt For: Primary Other (specify	General Aggrega	ate Year-to-Date ▼ 975.00	
SUBTOTAL of Receip	I		62.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 256 / 438 (check only one)    X   11a
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS SUSAN COLUCCI			Date of Receipt
	Mailing Address 703 SUCCASUNNA F			09 25 2010
	City LANDING	State NJ	Zip Code 07850	Transaction ID: INC.A.87820  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 HLT	on TH MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- В.	Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE Mailing Address 400 MECT 07711 075	) 		Date of Receipt
	Mailing Address 130 WEST 67TH STF	KEE1, #4J		09 25 7 2010
	City NEW YORK	State NY	Zip Code 10023	Transaction ID: INC.A.87782  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10020	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date ▼ 500.00	]
_ С.	Full Name (Last, First, Middle Initial) MR ROBERT COOK			Date of Receipt
	Mailing Address 270 S FRANKLIN TU	RNPIKE		0 9 2 5 Y Y Y Y Y Y
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.87359  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	on HLTH CARE OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .			75.00
	TOTAL This Period (last page this line numbe		<u> </u>	

ITEMIZED RECEIPTS	38)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 257 / 438   (check only one)
Any information copied from such Reports or for commercial purposes, other than us	and Statements may	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 I	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) JEFFREY COOLE			Date of Receipt
Mailing Address 155 ASTON HAL	L DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City EADS	State TN	Zip Code 38028	Transaction ID: INC.A.87914  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP TAX	1 AND REGULATORY REPOR	─ <b> </b> RTI
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) ANTONIO CORREIA			Date of Receipt
Mailing Address 19 WILLIAMS LA	NE		M M / D D / Y Y Y Y Y O D O D O D O D O D O D O D O
City CHAPPAQUA	State NY	Zip Code 10514	Transaction ID: INC.A.87838  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10014	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS DEV	
Receipt For:  Primary General  Other (specify) ▼	t	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MRS BARBARA COSGRIFF			Date of Receipt
Mailing Address 2045 MAYFAIR N	MCLEAN COURT		M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O
City FALLS CHURCH	State VA	Zip Code 22043	Transaction ID: INC.A.87880
FEC ID number of contributing federal political committee.	C	22043	Amount of Each Receipt this Period  195.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PUE	BLIC POL&EXTRNL AFFAIR	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 3900.00	
SUBTOTAL of Receipts This Page (option	l anal)		295.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 258 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN			Date of Receipt
	Mailing Address 25 FAIRWAY TRAIL  City	State	Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87495
	SPARTA	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PH	n ARMACY NETWORK MGM	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3846.20	
— В.	Full Name (Last, First, Middle Initial) MR HART COVEN			Date of Receipt
	Mailing Address 28 OAK LANE			09 / 25 / 2010
	City	State	Zip Code	Transaction ID: INC.A.87611
	MORRISTOWN FEC ID number of contributing federal political committee.	NJ C	07960	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BIAC		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
— С.	Full Name (Last, First, Middle Initial) JONATHAN COX			Date of Receipt
	Mailing Address 9638 DOVE SPRING	COVE		0 9 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87877
	GERMANTOWN FEC ID number of contributing federal political committee.	C	38139	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP BUS		
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			267.31
	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 259 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR ROBERT CRAIG  Mailing Address 7979 E SANTA CA	ATALINA DR		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SCOTTSDALE FEC ID number of contributing	State AZ	Zip Code 85255	Transaction ID: INC.A.87476  Amount of Each Receipt this Period  60.00
Receipt For:  Primary  Other (specify) ▼	Occupation EXEC DI	n R PRODUCT Year-to-Date ▼	
Full Name (Last, First, Middle Initial)  MR PETER CSUTOROS  Mailing Address 16 PLEASANT AV	ENUE		Date of Receipt  0 9 2 5 2 0 1 0
City  LINCOLN PARK  FEC ID number of contributing	State NJ	Zip Code 07035	Transaction ID: INC.A.87774  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  Other (specify) ▼	Occupation DIR FINA		
Full Name (Last, First, Middle Initial) MR DAVID CUNNOLD Mailing Address 5005 JONQUILLA	DRIVE		Date of Receipt
City ALPHARETTA	State GA	Zip Code 30004	Transaction ID: INC.A.87834  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	<del></del>	T MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)		110.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 260 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ANGELO CUOZZO			Date of Receipt
Mailing Address 19 IDA COURT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City STATEN ISLAND	State NY	Zip Code 10312	Transaction ID: INC.A.87547  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10012	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) JANET DAGLEY			Date of Receipt
Mailing Address 721 BROWNLEE D	RIVE		0 9 2 5 Y Y Y Y Y Y
City NASHVILLE	State TN	Zip Code 37205	Transaction ID: INC.A.87943  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07200	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR MAF		
Receipt For:  Primary General  Other (specify) ▼	<del>- + +</del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR AJAY DALAL			Date of Receipt
Mailing Address 4603 NEWCASTLE	DRIVE		0 9 2 5 2 0 1 0
City FRISCO	State TX	Zip Code 75034	Transaction ID: INC.A.87829  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	73034	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL SVCS	7
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 450.00	
			75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 261 / 438 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and addr	not be sold or used by any person ess of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	CTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JOHN DALY			Date of Receipt
Mailing Address 46 BLUEBELL CT	Olata	7'- 0-1-	09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87657
PARAMUS	NJ	07652	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TI	ECHNOLOGY	
Receipt For:	Aggregate \	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	]
Full Name (Last, First, Middle Initial) MS ROSELIN DANIEL			Date of Receipt
Mailing Address 17 DEVONSHIRE DE	RIVE		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.87620
RANDOLPH	NJ	07869	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TE	ECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS			Date of Receipt
Mailing Address 4156 DUNMORE DR	IVE		09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87596
LAKE WALES	FL	33859	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For:	Aggregate \	Year-to-Date ▼	
Primary General Other (specify) ▼		975.00	
SUBTOTAL of Receipts This Page (optional)			75.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 262 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MARY DASCHNER  Mailing Address 2926 EWING AVE S  City MINNEAPOLIS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code MN 55416  C  Occupation GROUP PRES RETIREE SOLUTION Aggregate Year-to-Date  3846.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
Full Name (Last, First, Middle Initial) MR ANDREW DAVIS Mailing Address 5616 BROOK DRIVE  City EDINA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code MN 55439  C  Occupation VP STRATEGIC INIT/GOVT PROC Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
Other (specify)  Full Name (Last, First, Middle Initial) MR BARRY DAVIS Mailing Address 11 WEISS DR  City TOWACO FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07082  C Occupation	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)	SVP & GENERAL MGR Aggregate Year-to-Date ▼  3840.00	434.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 263 / 438 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) WARREN DAVIS  Mailing Address 3131 SADDLEGAIT  City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State TN C Occupation DIR BUS		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR DANIEL DAVISON Mailing Address 908 STERLING DR  City FRANKLIN LAKES FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupation SVP FIN	Zip Code 07417  n ANCIAL PLANNING Year-to-Date  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR CARLTON DEBRULE Mailing Address 12 0AKLAND DR  City MONTVALE  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)		Zip Code 07645  n NESS 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
SUBTOTAL of Receipts This Page (optional	al)		130.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 264 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and add	lress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS KATHLEEN DEFABIIS  Mailing Address 104 HUDSON AVE  City  WALDWICK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)		Zip Code 07463 ONT SVC DELIVERY Year-to-Date ▼	Date of Receipt  M M M / D D / 2 5 / 2 0 1 0  Transaction ID: INC.A.87730  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS  Mailing Address N108 W7045 BERKSI  City CEDARBURG  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State WI  C  Occupation SR DIR A	Zip Code 53012	Date of Receipt  M M M / D D / 25 / 2010  Transaction ID: INC.A.87567  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR PAUL DELLO RUSSO  Mailing Address 80 HILLSIDE AVENUE  City GLEN RIDGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State NJ  C  Occupation ASST CC		Date of Receipt  M M M
SUBTOTAL of Receipts This Page (optional)			75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 265 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS TONI DEMANSS			Date of Receipt
Mailing Address 32 RED BARN LAN	NE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87793
WEST MILFORD  FEC ID number of contributing federal political committee.	C	07480	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS ANN-MARGARET DEMARCO			Date of Receipt
Mailing Address 1 RUGBY ROAD	0 9 2 5 2 0 1 0		
City CEDAR GROVE	State NJ	Zip Code	Transaction ID: INC.A.87360
FEC ID number of contributing federal political committee.	C	07009	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS MAUREEN DEMPSEY			Date of Receipt
Mailing Address 17 RICHWOOD PL	LACE		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City DENVILLE	State NJ	Zip Code 07834	Transaction ID: INC.A.87812  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07004	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MED	n DICARE COMPLIANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (options	-I)		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 266 / 438 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the state of the commercial purposes.	Statements may ne name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JAMES DENBY			Date of Receipt
Mailing Address 78 SHERWOOD ST			09 / 25 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87474
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	n FINANCE	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) MR PATRICK DENNIS	1		Date of Receipt
Mailing Address 2344 FRENCH ALPS	S AVE.		09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87417
HENDERSON	NV	89044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MR JOHN DERRICO			Date of Receipt
Mailing Address 195 HACKENSACK	AVENUE		09 / 25 / 2010
City	State	Zip Code	Transaction ID: INC.A.87759
HARRINGTON PARK	NJ	07640	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR I	n MARKETING	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)			62.50

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 267 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JUDITH DERRINGER			Date of Receipt
	Mailing Address 3306 SHALLOW COV	E COURT		09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87925
	CRESTWOOD	KY	40014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation GENER/	on AL MGR - MULTI BRANCH	
	Receipt For:    Primary   General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
Б.	Full Name (Last, First, Middle Initial) MS LAURA DEVEAU	Date of Receipt		
	Mailing Address 2289 BEDFORD ST A	09 25 2010		
	City	State	Zip Code	Transaction ID: INC.A.87558
	STAMFORD	CT	06905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on PRODUCT MGMT	
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		500.00	
с.	Full Name (Last, First, Middle Initial) MS KAREN DEZEARN			Date of Receipt
	Mailing Address 4740 BRINKLEY LANE NE			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87323
	ATLANTA	GA	30342	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>, '</del>	L ACCT EXEC	
			e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00	
	SUBTOTAL of Receipts This Page (optional) .	1		75.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 268 / 438   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR FRANK DICALOGERO			Date of Receipt
Mailing Address 36 ARTHUR STREE	ĒΤ		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RIDGEFIELD PARK	State NJ	Zip Code 07660	Transaction ID: INC.A.87353  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 FINA		
Receipt For:  Primary  General  Other (specify)		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MS TAMARA DIDYK			Date of Receipt
Mailing Address 136 BEAVER RUN	0 9 2 5 Y Y Y Y Y Y		
City LAFAYETTE	State NJ	Zip Code 07848	Transaction ID: INC.A.87571  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07040	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FNT	n ERPRISE OPS	
Receipt For:  Primary General  Other (specify) ▼	- <del>- '</del>	Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MS PATRICIA DODDS			Date of Receipt
Mailing Address 28W250 RIVIERA C	CT		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BARTLETT	State IL	Zip Code 60103	Transaction ID: INC.A.87379  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00100	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation SPECIAL	TY NATL SALES EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional			62.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 269 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  ANDREW DOEDYNS  Mailing Address 117 CREST DRIVE  City  BEAVER  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary  General  Other (specify)		Zip Code 15009 n GIONAL OPS e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.87900  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR ROBERT DOLAN  Mailing Address 9 CRANE AVENUE  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 HNOLOGY y Year-to-Date ▼	Date of Receipt  M M M / D D / 25 / 2010  Transaction ID: INC.A.87624  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS JUDITH DONNELLY  Mailing Address 3 IRONWORKS ROA  City MONROE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State NY  C  Occupation DIR FINA		Date of Receipt    M   M   D   D   Y   Y   Y   Y
SUBTOTAL of Receipts This Page (optional) .			75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS LYNDA DOREMUS			Date of Receipt
Mailing Address 16 E HOMESTEAD	AVE		09 / 25 / Y Y Y Y Y
City COLLINGSWOOD	State NJ	Zip Code 08108	Transaction ID: INC.A.87542  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:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS MERIDITH DORNER			Date of Receipt
Mailing Address 8010 ORCHARD VIEW LANE			09 25 2010
City FOGELSVILLE	State PA	Zip Code 18051	Transaction ID: INC.A.87348  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10031	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	oct exec	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	]
Full Name (Last, First, Middle Initial) STEPHANIE DUCKER			Date of Receipt
Mailing Address 4630 HICKORY RII	Mailing Address 4630 HICKORY RIDGE VIEW COURT		
City EUREKA	State MO	Zip Code 63025	Transaction ID: INC.A.87888  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:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	.0		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 271 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MICHEL DUFRESNE			Date of Receipt
Mailing Address 41ELM ST APT 3P			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.87772
MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENTE	n ERPRISE BUS INTELLIGEN	 C <b>E</b>
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3846.00	
Full Name (Last, First, Middle Initial) MR DANA DUNCAN			Date of Receipt
Mailing Address 125 COMSTOCK TRAI	L		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87546
EAST HAMPTON	CT	06424	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 FECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY			Date of Receipt
Mailing Address 2 DECKER TERRACE			09 25 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.87382
KINNELON	NJ	07405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	0 0		242.30

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 272 / 438 (check only one)    X
4	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY Mailing Address 14026 KNOX STREET	Date of Receipt		
	Maining Address 14020 KNOX STREE	09 25 2010		
	City	State	Zip Code	Transaction ID: INC.A.87413
	OVERLAND PARK  FEC ID number of contributing federal political committee.	C	66221	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:	+ +	ES SEGMENT LEADER	_
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
— В.	Full Name (Last, First, Middle Initial) MR MARK DUNN	1		Date of Receipt
	Mailing Address 2 OLD MILL ROAD	0 9 2 5 2 0 1 0		
	City	State	Zip Code	Transaction ID: INC.A.87386
	SANDY HOOK	СТ	06482	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer MEDCO HEALTH SOLUTIONS	, ·	TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 700.00	
_ С.	Full Name (Last, First, Middle Initial) MR PETER DURAN			Date of Receipt
	Mailing Address 875 HARRISTOWN RD			0 9 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87366
	GLEN ROCK FEC ID number of contributing federal political committee.	NJ C	07452	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRI		
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼  500.00	
	SUBTOTAL of Receipts This Page (optional)			110.00
$\vdash$	TOTAL This Period (last page this line number		•	

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 273 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
	copied from such Reports and all purposes, other than using the OMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	EALTH SOLUTIONS INC.  ast, First, Middle Initial)	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
MS SUZANN				Date of Receipt  0 9 2 5 2 0 1.0
City PARK RID	GF	State NJ	Zip Code 07656	Transaction ID: INC.A.87623  Amount of Each Receipt this Period
FEC ID num	ber of contributing cal committee.	C	07000	25.00
	ployer ALTH SOLUTIONS	Occupatio DIR BUS	n SINESS REQUIREMENTS	
Receipt For: Primar Other	y General (specify) <b>▼</b>	Aggregate	e Year-to-Date ▼ 500.00	
MS REBECC		Date of Receipt		
Mailing Addr	Mailing Address 1400 POPLAR ESTATES PKY			09 25 2010
City	-0.4.4.1	State	Zip Code	Transaction ID: INC.A.87921
	ber of contributing cal committee.	C	38138	Amount of Each Receipt this Period  25.00
	ployer HEALTH GROUP	Occupatio DIR RN I	n PERF MGMT & IMPROVEM	ENT
Receipt For: Primar Other	y General specify) ♥	Aggregate	e Year-to-Date ▼ 500.00	]
Full Name (L MS ARLENE	ast, First, Middle Initial) EDLIN			Date of Receipt
Mailing Addr	ess 16 CHESTNUT STRE	ET		09 25 2010
City CORNWA	LL	State NY	Zip Code 12518	Transaction ID: INC.A.87695  Amount of Each Receipt this Period
	ber of contributing cal committee.	C		25.00
	ployer ALTH SOLUTIONS	Occupatio VP SALE	ES	
Receipt For: Primar Other	y General (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
OUDTOTAL (	Receipts This Page (optional) .	•		75.00

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL F	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS JANET EDWARDS			Date of Receipt
Mailing Address N8W27837 WOOI	DRIDGE LANE		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.87819  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) ▼	<del> </del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS			Date of Receipt
Mailing Address 109 KAREN PLAC	09 25 2010		
City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.87373  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07401	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	1
Receipt For:  Primary General  Other (specify) ▼	- + ·	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) DR EDWARD EISENBERG, MD			Date of Receipt
Mailing Address 128 SUMMIT AVE	NUE		M M / D D / Y Y Y Y O D O O O O O O O O O O O O O O
City UPPER MONTCLAIR	State NJ	Zip Code 07043	Transaction ID: INC.A.87797
FEC ID number of contributing federal political committee.	C	07045	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MEDICAL	n RE CHIEF MEDICAL OFFIC	EIR
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 950.00	
SUBTOTAL of Receipts This Page (option			125.00

or for commercial purposes,  NAME OF COMMITTEE	other than using the name and add (In Full) DLUTIONS INC. POLITICAL Add (In Full) iddle Initial) I GRAHAM TERRACE State	y not be sold or used by any persondress of any political committee to s ACTION COMMITTEE (a.k.a.	Date of Receipt
Full Name (Last, First, MMR FREDERICK ELSTON Mailing Address 106 (City SADDLE BROOK FEC ID number of contrifederal political committee	DLUTIONS INC. POLITICAL A iddle Initial) I GRAHAM TERRACE State	ACTION COMMITTEE (a.k.a.	Date of Receipt
MR FREDERICK ELSTON Mailing Address 106 (  City SADDLE BROOK  FEC ID number of contri federal political committe	GRAHAM TERRACE State		╡ <u> </u>
City SADDLE BROOK FEC ID number of contri federal political committe	State		M M / D D / V V V
SADDLE BROOK FEC ID number of contri federal political committe			09 25 2010
FEC ID number of contri federal political committe	NI I	Zip Code	Transaction ID: INC.A.87609
Name of Employer MEDCO HEALTH SOLU		07663	Amount of Each Receipt this Period  25.00
	JTIONS Occupation TECHNIC	n CAL SPECIALIST	-
Receipt For:  Primary  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, M MR BRAD EPSTEIN	iddle Initial)		Date of Receipt
	LONG HILL ROAD EAST	09 / 25 / Y Y Y Y	
City BRIARCLIFF MANO	State R NY	Zip Code 10510	Transaction ID: INC.A.87799  Amount of Each Receipt this Period
FEC ID number of contri federal political committe	buting	1 1 1 1 1 1	50.00
Name of Employer MEDCO HEALTH SOLU	JTIONS Occupation VP COR	n P COMMUNICATIONS	1
Receipt For:  Primary  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, M DR ROBERT EPSTEIN	iddle Initial)		Date of Receipt
Mailing Address 75 TV	WEED BLVD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City UPPER GRANDVIEN	State N NY	Zip Code 10960	Transaction ID: INC.A.87272
FEC ID number of contri federal political committe	buting	10300	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLU	JTIONS Occupation CMO SV	n P MEDICAL&ANLYTC AFFRS	- 3
Receipt For:  Primary  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3846.20	
SUBTOTAL of Receipts TI	nis Page (optional)	<b>&gt;</b>	267.31

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 276 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR SCOTT ERHARDT	MR SCOTT ERHARDT				
	Mailing Address 11540 39TH AVE N	09 25 2010				
	City PLYMOUTH	State MN	Zip Code 55441	Transaction ID: INC.A.87480  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR ACCT MGMT			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00			
В.	Full Name (Last, First, Middle Initial) MR YAKOV ESTERLIS			Date of Receipt		
	Mailing Address 100 WINSTON DRIVE 17 C NORTH			09 25 2010		
	City	State	Zip Code	Transaction ID: INC.A.87732		
	CLIFFSIDE PARK  FEC ID number of contributing federal political committee.	NJ C	07010	Amount of Each Receipt this Period  25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on TECHNOLOGY			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]		
C.	Full Name (Last, First, Middle Initial) MR BRIAN EZROW					
	Mailing Address 2524 WIEAND ROAD			09 25 2010		
	City	State	Zip Code	Transaction ID: INC.A.87429		
	QUAKERTOWN  FEC ID number of contributing federal political committee.	C	18951	Amount of Each Receipt this Period  25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on E-COM STRAT & DELI			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00			
	SUBTOTAL of Receipts This Page (optional)			100.00		
	TOTAL This Period (last page this line number		<u> </u>			

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 2777 438   (check only one)
Any information copied from such Report for commercial purposes, other that	ports and Statements may n using the name and add	not be sold or used by any persoress 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 SOLUTION	NS INC. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initia MR STEVEN FANDETTI	(ا		Date of Receipt
Mailing Address 15804 SORA	WATER DR.		09 25 2010
City LITHIA	State FL	Zip Code 33547	Transaction ID: INC.A.87396  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC		
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initia	J.,		Date of Receipt
Mailing Address 2020 HEATH	ER COVE		0 9 2 5 Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38119	Transaction ID: INC.A.87938  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.10	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP HFAI	TH OUTCOME SOLUTION	S
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initia SUSAN FAUST	<u> </u>		Date of Receipt
	SWOOD COVE		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38119	Transaction ID: INC.A.87906  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00110	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLIEN	IT SLS AND MGD CARE	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (	optional)		150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and	for each category of the Detailed Summary Page  Statements may not be sold or used by any pers	FOR LINE NUMBER: PAGE 278 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  son for the purpose of soliciting contributions
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS KATHARINE FEDUSKA Mailing Address 2354 DOLPHIN CT		Date of Receipt  0 9 2 5 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.87527
HENDERSON	NV 89074	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1359.51	
Full Name (Last, First, Middle Initial)  DR RICHARD FEIFER		Date of Receipt
Mailing Address 32 EILEEN DR		0 9 2 5 Y Y Y Y Y
City MAHWAH	State Zip Code	Transaction ID: INC.A.87462
FEC ID number of contributing federal political committee.	NJ 07430	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CARE ENHANCING SOLUTION	s
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR THOMAS FEITEL		Date of Receipt
Mailing Address 58 APPLE HILL DR		09 25 2010
City	State Zip Code	Transaction ID: INC.A.87531
GILLETTE	NJ 07933	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.23
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP CORP MKTG & E-COMM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3844.60	
SUBTOTAL of Receipts This Page (optional)		257.23

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 2/9 / 438   (check only one)
Any information for for comm	ation copied from such Reports and shercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\ \	OF COMMITTEE (In Full) O HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	ne (Last, First, Middle Initial) IART FELDMAN			Date of Receipt
Mailing A	Address 109 MEADOWBROO	K ROAD		0 9 2 5 2 0 1 0
City RAND	OLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.87269  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C		25.00
Name of MEDCC	f Employer ) HEALTH SOLUTIONS	Occupation EXEC DI	n R TECHNOLOGY	
	For: imary General ther (specify) ▼		Year-to-Date ▼ 500.00	
	ne (Last, First, Middle Initial) VN FELDNER			Date of Receipt
	Address 275 BIRCH STREET			M M / D D / Y Y Y Y O D O D O D O D O D O D O D O D
City EMER	SON	State NJ	Zip Code 07630	Transaction ID: INC.A.87696  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C	0.000	25.00
Name of MEDCC	f Employer ) HEALTH SOLUTIONS	Occupation SR DIR F	n BUSINESS REQUIREMENTS	
	For: imary General ther (specify) ▼	<del>-, '</del>	e Year-to-Date ▼ 500.00	
	ne (Last, First, Middle Initial) DMAS FERRAZZANO	1		Date of Receipt
	Address 464 SPRING AVE.			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	EWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.87643
FEC ID	number of contributing political committee.	C	07430	Amount of Each Receipt this Period  25.00
Name of MEDCC	f Employer O HEALTH SOLUTIONS	Occupation SR DIR	n FECHNOLOGY	
	For: imary General ther (specify) ▼		Year-to-Date ▼ 500.00	
SURTOTA	AL of Receipts This Page (optional) .	1		75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 280 / 438 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	ress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS EDYTHE FERRIS  Mailing Address 246 SLATER RD			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TOLLAND FEC ID number of contributing	State CT	Zip Code 06084	Transaction ID: INC.A.87363  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  Other (specify) ▼	Occupation EXEC DIF	R CLINICAL SVCS  Year-to-Date ▼  475.00	
Full Name (Last, First, Middle Initial) RONALD FIELMANN Mailing Address 2061 ARLEEN CT			Date of Receipt  0 9 2 5 2 0 1 0
City SCHAUMBURG  FEC ID number of contributing federal political committee.	State IL C	Zip Code 60194	Transaction ID: INC.A.87907  Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	Occupation AVP SAL Aggregate		
Full Name (Last, First, Middle Initial) MR DON FISCHER Mailing Address 10 TRACY CIRCLE			Date of Receipt  0 9 2 5 2 0 1 0
City  CAMPBELL HALL  FEC ID number of contributing federal political committee.	State NY	Zip Code 10916	Transaction ID: INC.A.87383  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		ECHNOLOGY Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		•	75.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)         X       11a       11b       11c       12         13       14       15       16       1
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	C. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR EDWARD FISCHER		Date of Receipt
Mailing Address 465 OLD STONE R		09 25 2010
City RIDGEWOOD	State Zip Code NJ 07450	Transaction ID: INC.A.87447  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL PROD INTEGRATION	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MS THERESA FITCH		Date of Receipt
Mailing Address 180 COOK STREE #107	Г	09 25 7 2010
City	State Zip Code	Transaction ID: INC.A.87897
DENVER  FEC ID number of contributing federal political committee.	CO 80206	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS		Date of Receipt
Mailing Address 1933 MT. OLIVE AGOSTA ROAD		09 25 7 2010
City NEW BLOOMINGTON	State Zip Code OH 43341	Transaction ID: INC.A.87581  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 45541	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR HLTH CARE OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l)	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	ne Cirieck Offiny Office)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and address of any political com	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.  E (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JOHN FORD Mailing Address 6 SILVER LAKE DRI  City SHAMONG FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 08088  C  Occupation DIR OPS  Aggregate Year-to-Date   585.	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
Full Name (Last, First, Middle Initial) CHAD FOREMAN Mailing Address 9544 DOGWOOD ES  City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	STATES  State Zip Code TN 38139  C  Occupation DIR FINANCE II  Aggregate Year-to-Date   500.	Date of Receipt  M M M / D D / 2 5 / 2 0 1 0  Transaction ID: INC.A.87945  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) HOLLEY FORTH Mailing Address 115 BAYSIDE COUF  City RICHMOND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	T  State Zip Code CA 94804  C  Occupation DIR PRODUCT LINE  Aggregate Year-to-Date ▼  500.	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 25 / 2010  Transaction ID: INC.A.87935  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)	1	65.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(,</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 283 / 438   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) KEVIN FRANCO			Date of Receipt
Mailing Address 140 BELLAIR ROAL UNIT Q	D		09 25 YYYYY
City	State	Zip Code	Transaction ID: INC.A.87658
RIDGEWOOD  FEC ID number of contributing federal political committee.	NJ C	07450	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt
Mailing Address 9 GREEN HILL TRA	AIL		0 9 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TROPHY CLUB	State TX	Zip Code 76262	Transaction ID: INC.A.87600
FEC ID number of contributing federal political committee.	C	70202	Amount of Each Receipt this Period  100.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP NAT	n ΓΙΟΝΑL SERVICE CENTER	
Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 2896.10	
Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL			Date of Receipt
Mailing Address 1434 NARRAGANS	ETT BLVD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CRANSTON	State	Zip Code	Transaction ID: INC.A.87406
FEC ID number of contributing federal political committee.	C	02905	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR GOV	n / AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		180.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 284 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any g the name and address of any political committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	IC. POLITICAL ACTION COMMITTEE (a	a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) FELIX FRUEH Mailing Address 114404 FALLING I		Date of Receipt
Mailing Address 14401 FALLING L		09 25 2010
City <u>DARNESTOWN</u>	State Zip Code MD 20878	Transaction ID: INC.A.87863  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 RESEARCH & DEVELOPME	NT
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR TRACY FURGIUELE		Date of Receipt
Mailing Address 7773 TILLINGHAS	ST DRIVE	0 9 2 5 Y Y Y Y Y
City DUBLIN	State Zip Code OH 43017	Transaction ID: INC.A.87677
FEC ID number of contributing federal political committee.	OH 43017	Amount of Each Receipt this Period  35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & CHIEF PHARMACIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) ROBERT FURTH		Date of Receipt
Mailing Address 1450 PORTLAND	AVENUE	09 25 2010
City ST PAUL	State Zip Code MN 55104	Transaction ID: INC.A.87918  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation GENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	•
CURTOTAL of Descripto This Descriptor	al)	110.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 285 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ne name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS CARISSA GABOROW  Mailing Address 6 JUHASZ ROAD  City  NORWALK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code CT 06854  C  Occupation SR DIR BUSINESS DEVELOPMENT Aggregate Year-to-Date   500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MR JOSEPH GALARDI  Mailing Address 24 MOREHOUSE PL  City  NEW PROVIDENCE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)		Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.87268  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  MS PAMELA GALASSINI  Mailing Address 720 N. LARRABEE  APT 1701  City  CHICAGO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code IL 60654  C  Occupation SVP & GENERAL MGR  Aggregate Year-to-Date   3846.20	Date of Receipt  M M M / D D / Y Y Y Y Y Y  Transaction ID: INC.A.87744  Amount of Each Receipt this Period  192.31
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	267.31

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 286 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
C	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS PATRICIA GALLAGHER  Mailing Address 842 ASHLER CT			Date of Receipt
		Otala	7'- 0-4-	09 25 2010
	City COLUMBUS	State OH	Zip Code 43235	Transaction ID: INC.A.87697  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	n CCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
 3.	Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO	I		Date of Receipt
	Mailing Address 69 LAKEVIEW DR			09 25 7 2010
	City OLD TAPPAN	State NJ	Zip Code 07675	Transaction ID: INC.A.87576  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07075	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIE	n NT RELATIONS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
_ }.	Full Name (Last, First, Middle Initial) MICHAEL GALVIN			Date of Receipt
	Mailing Address 25 BALLYMEADE RO	AD		0 9 2 5 2 0 1 0
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.87777  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/CH	n IEF INFRASTRUCTURE OF	FR
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3846.20	
	SUBTOTAL of Receipts This Page (optional)			267.31
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each c	roto ophodulo(o)	FOR LINE NUMBER: PAGE 287 / 438 (check only one)    X
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and address of any p	political committee to so	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR OMHARAISRIRAM GANGAIKONDAN-IYEE Mailing Address 9 CAIRNES ROAD  City MORRIS PLAINS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07950  C  Occupation DIR TECHNOLOGY  Aggregate Year-to-Date		Date of Receipt  M M M / D D / 2 5 2 0 1 0  Transaction ID: INC.A.87786  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR PETER GAYLORD  Mailing Address 1201 BRIDGE STREE  City  ASBURY PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07712  C  Occupation SVP TREASURY & Aggregate Year-to-Date	FINANCIAL EVALS	Date of Receipt  M M M / D D / 25
Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA Mailing Address 20 BROOKSHIRE DF  City ROBBINSVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 08691  C  Occupation VP/GM  Aggregate Year-to-Date	1 1 1	Date of Receipt  M M M / D D / 2 5 2 0 1 0  Transaction ID: INC.A.87419  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional) .		<b>&gt;</b>	135.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 288 / 438 (check only one)    X   11a
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MATTHEW GIBBS			Date of Receipt
	Mailing Address 27 N. WACKER DR. SUITE 246			09 / 25 / Y Y Y Y Y
	City CHICAGO	State IL	Zip Code 60606	Transaction ID: INC.A.87850  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIEF C	on CLINICAL OFFICER	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	
 3.	Full Name (Last, First, Middle Initial) MR ROBERT GIBBS	1		Date of Receipt
	Mailing Address 544 DENMOOR COURT			09 25 2010
	City GALLOWAY	State OH	Zip Code	Transaction ID: INC.A.87345
	FEC ID number of contributing federal political committee.	C	43119	Amount of Each Receipt this Period  12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
 ;.	Full Name (Last, First, Middle Initial) MR THOMAS GILSON	1		Date of Receipt
	Mailing Address 2 PELL FARM ROAD			09 25 2010
	City SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.87736  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	on GENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3846.20	
[	SUBTOTAL of Receipts This Page (optional)			279.81
	FOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 289 / 438   (check only one)		
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mag	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Full Name (Last, First, Middle Initial)  MR SCOTT GILYARD			Date of Receipt		
Mailing Address 305 BERGAMOT DR	IVE		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.87273		
MEDINA	MN	55340	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		192.30		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio PRES UI				
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3846.00			
Full Name (Last, First, Middle Initial) MR JONAH GITLITZ			Date of Receipt		
Mailing Address 43 OVERLOOK RIDO	Mailing Address 43 OVERLOOK RIDGE				
City	State	Zip Code	Transaction ID: INC.A.87357		
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	Occupatio SR NATI	n _ ACCT EXEC			
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼		1000.00			
Full Name (Last, First, Middle Initial)  MR JOHN GOBINSKI			Date of Receipt		
Mailing Address 28 BARBARA DRIVE			09 25 7 2010		
City	State	Zip Code	Transaction ID: INC.A.87439		
WARWICK	NY	10990	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer MEDCO HEALTH SOLUTIONS		OM STRAT & DELIV			
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼		500.00			
SUBTOTAL of Receipts This Page (optional)		<b>_</b>	267.30		
TOTAL This Period (last page this line numbe	er only)				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 290 / 438 (check only one)    X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial) MR PAUL GOERDT Mailing Address 1700 SUNRISE COUF	RT		Date of Receipt
				09 25 2010
	City BURNSVILLE	State MN	Zip Code 55306	Transaction ID: INC.A.87543  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CLIN	n ICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) MS AUDREY GOODMAN			Date of Receipt
	Mailing Address 26 HILLSIDE AVE.			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87659
	GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ORG		
	Receipt For:	T -	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	Full Name (Last, First, Middle Initial) MR JAMES GORMAN			Date of Receipt
	Mailing Address 11 WASHBURN RD			09 25 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.87362
	CANTON	СТ	06022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>, '</del>	CLIENT & MKT PROG STRA	AT
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
		•		90.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 291 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any perso g the name and address of any political committee to	
` ′	IC. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JAMES GRANT, II	ANIE	Date of Receipt
Mailing Address 1928 BEVERLY LA	AINE State Zip Code	0 9 2 5 2 0 1 0  Transaction ID: INC.A.87438
BUFFALO GROVE	IL 60089	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 FINANCIAL INSIGHTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) LAURIE GREENBERG		Date of Receipt
Mailing Address 27760 WOODLAN		09 / 25 / 2010
City	State Zip Code	Transaction ID: INC.A.87860
BOERNE	TX 78015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL THERAPEUTICS	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) MR EDWARD GRIX	-	Date of Receipt
Mailing Address 525 ORANGEBUF	RG RD	09 / 25 / 2010
City PEARL RIVER	State Zip Code NY 10965	Transaction ID: INC.A.87466  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	<u> </u>
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	nal)	100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 292 / 438 (check only one)    X   11a
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	solicit contributions from such committee.
∠ 4.	Full Name (Last, First, Middle Initial) MS GINA GRUHN			Date of Receipt
	Mailing Address 13 WEATHER VANE [	DRIVE		09 25 2010
	City CONVENT STATION	State NJ	Zip Code 07960	Transaction ID: INC.A.87517  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07000	40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGION.	n AL VP SALES-SYSTEMED	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 800.00	
- 3.	Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD			Date of Receipt
	Mailing Address 211 NORTH END AVE APT 3C	09 / 25 / Y Y Y Y Y Y		
	City NEW YORK	State NY	Zip Code 10282	Transaction ID: INC.A.87350
	FEC ID number of contributing federal political committee.	C	10202	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CONS	1 SUMER DRIVEN MKTS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	]
- :.	Full Name (Last, First, Middle Initial) MRS CAROLYN GUGLIELMO Mailing Address 42 VETERANS PARKV	WAY		Date of Receipt  0 9 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87660
	PEARL RIVER FEC ID number of contributing federal political committee.	C	10965	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			115.00

ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RICHARD GUIOR			Date of Receipt
Mailing Address 50 BELLEVUE 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.87291
SUMMIT  FEC ID number of contributing federal political committee.	NJ C	07901	Amount of Each Receipt this Period 90.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio GROUP		
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1800.00	
Full Name (Last, First, Middle Initial) MS KAVITHA GULLAPALLI			Date of Receipt
Mailing Address 67 ATHERTON CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WAYNE	State NJ	Zip Code 07470	Transaction ID: INC.A.87437  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07470	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n HNOLOGY	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS VALERIE HAERTEL			Date of Receipt
Mailing Address 7 PARSLOE COUR	T		09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87830
MAHWAH  FEC ID number of contributing federal political committee.	NJ C	07430	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INVE	n STOR RELATIONS	
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optiona	l)		165.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 294 / 438 (check only one)    X
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR RICHARD HALPERN  Mailing Address 23 MAPLEMOOR	LANE	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WHITE PLAINS FEC ID number of contributing	State Zip Code NY 10605	Transaction ID: INC.A.87355  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  Other (specify)  General	Occupation DIR TECHNOLOGY  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) MRS INCORONATA HAMWAY Mailing Address 7 ALLYSON CT		Date of Receipt  0 9 2 5 2 0 1 0
City LONG VALLEY	State Zip Code NJ 07853	Transaction ID: INC.A.87653  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 CS SYSTEMS PLAN & IMPLEM	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	]
Full Name (Last, First, Middle Initial) MR GREGORY HANSEN		Date of Receipt
Mailing Address 1659 ISABELLA P	ARKWAY	09 25 2010
City CHASKA	State Zip Code MN 55318	Transaction ID: INC.A.87743  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACCT SVCS & ADMIN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 295 / 438 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements 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
MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR CHRISTOPHER HARLOW			Date of Receipt
Mailing Address 8 PROSPECT PLACE		7.0	09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87335
POMPTON PLAINS FEC ID number of contributing	NJ C	07444	Amount of Each Receipt this Period 25.00
federal political committee.			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	FINANCE	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) SHARON HARRIS			Date of Receipt
Mailing Address 186 N. WHITE STATION	ON RD		0 9 2 5 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87909
MEMPHIS	TN	38117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HR	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS SHANA HART			Date of Receipt
Mailing Address 20 FAIR GREEN DRIV	Æ		09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87511
TROPHY CLUB	TX	76262	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	ACCT EXEC	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
SUBTOTAL of Receipts This Page (optional)			100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 296 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
(	Any information copied from such Reports and Spring for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR MARK HARTMANN	_		Date of Receipt
	Mailing Address 8980 KNOBLE COUF	{		09 25 7 2010
	City	State	Zip Code	Transaction ID: INC.A.87482
	EDEN PRAIRIE  FEC ID number of contributing	C	55347	Amount of Each Receipt this Period  25.00
	federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n	
		DIR ACC	CT MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
— В.	Full Name (Last, First, Middle Initial) MR PETER HARTY			Date of Receipt
	Mailing Address 19520 YELLOW WIN	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.87270
	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		ERNMENT AFFAIRS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3846.20	
с. С.	Full Name (Last, First, Middle Initial) DAN HAYES			Date of Receipt
	Mailing Address 4679 AYRON TERRA	CE		0 9 2 5 Y Y Y Y Y Y
	City PALM HARBOR	State FL	Zip Code 34685	Transaction ID: INC.A.87903  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation VP OPS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .			242.31
ı	TOTAL This Period (last page this line number		<u> </u>	

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 297 / 438 (check only one)    X
or for co	rmation copied from such Reports and mmercial purposes, other than using the EOF COMMITTEE (In Full) DCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full N	Jame (Last, First, Middle Initial) JARK HEGGESTAD  19 Address 13210 N. 11TH AVE.	POLITICAL /	ACTION COMMITTEE (a.k.a	Date of Receipt
City	DENIX	State AZ	Zip Code 85029	Transaction ID: INC.A.87378  Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		25.00
	e of Employer CO HEALTH SOLUTIONS ipt For:	Occupatio VP SALE		
	Primary General Other (specify) ▼	33, 53	500.00	
MR T	lame (Last, First, Middle Initial) HOMAS HEKKER ng Address 28 WEST THRID STF	REET #1332		Date of Receipt
City		0 9 2 5 2 0 1 0  Transaction ID: INC.A.87783		
•	JTH ORANGE	NJ	Zip Code 07079	Amount of Each Receipt this Period
FEC feder	ID number of contributing al political committee.	C		30.00
Name MED	e of Employer CO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
MR S	Jame (Last, First, Middle Initial) COTT HELMUS ng Address 23 VALLEY RD			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.87351
FEC	CCASUNNA  ID number of contributing all political committee.	C	07876	Amount of Each Receipt this Period 125.00
	e of Employer CO HEALTH SOLUTIONS	Occupatio VP CLIE	n NT SOLUTIONS	
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2100.00	
SUBTO	TAL of Receipts This Page (optional)	1		180.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 298 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR GLENN HERDLING			Date of Receipt
	Mailing Address 646 JAMES LN  City	State	Zip Code	0 9 2 5 2 0 1 0 2 5 2 7 2 0 1 0
	RIVER VALE	NJ	07675	Transaction ID: INC.A.87499  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CRE	n EATIVE DEVELOPMENT	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
_ В.	Full Name (Last, First, Middle Initial) MS PATRICIA HERZBERG			Date of Receipt
	Mailing Address 302 AUTUMN HILL DF	09 25 2010		
	City	State	Zip Code	Transaction ID: INC.A.87289
	MORGANVILLE FEC ID number of contributing	NJ	07751	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	<sup>n</sup> GENERIC DRUG PURCHAS	ING
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		500.00	
_ C.	Full Name (Last, First, Middle Initial) MR ERIC HESS			Date of Receipt
	Mailing Address 10 CARLTON RD			0 9 2 5 2 0 1 0
	City FLANDERS	State NJ	Zip Code 07836	Transaction ID: INC.A.87451
	FEC ID number of contributing federal political committee.	C	07656	Amount of Each Receipt this Period  60.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ENG	n INEERING & OPS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1200.00	
	SUBTOTAL of Receipts This Page (optional)			110.00
r	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 299 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JANE HILDEBRANDT Mailing Address 35 CASCADE WAY  City BUTLER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07405  C  Occupation DIR E-COM STRAT & DELIV  Aggregate Year-to-Date   500.00	Date of Receipt  M M C D D C 2 5 2 0 1 0  Transaction ID: INC.A.87477  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR DANIEL HLUDZINSKI Mailing Address 385 WASHINGTON S  City TAPPAN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10983  C  Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date  500.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON Mailing Address 16 LUTH TERRACE  City WEST ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07052  C  Occupation SVP PHARMACY OPS  Aggregate Year-to-Date  2420.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		242.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 300 / 438 (check only one)    X   11a
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN Mailing Address 974 HILLCREST RC  City RIDGEWOOD FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State NJ  C  Occupation VP FACI		Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87661  Amount of Each Receipt this Period  50.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR TIMOTHY HOGAN  Mailing Address 9 HIRLE ST		1000.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CORNWALL ON HUDSON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 12520  CAL SPECIALIST  Year-to-Date   500.00	Transaction ID: INC.A.87472  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR ROGER HOLLAND Mailing Address 41 SAINT RAPHAE  City LAGUNA NIGUEL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State CA C Occupation VP SALE		Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87572  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional	1)		125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 301 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	Statements may not be sold or used by any person name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JOHN HOLLINGER Mailing Address 784 CAPE HENRY DF  City COLUMBUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code OH 43228  C Occupation DIR BUSINESS PLANNING Aggregate Year-to-Date  390.00	Date of Receipt  M M / D D / Y Y Y Y Y  O 9
Full Name (Last, First, Middle Initial) MR ROBERT HOLLIS Mailing Address 88 MILLS STREET  City MORRISTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07960  C  Occupation SR DIR INTERNATL BUSINESS DEV Aggregate Year-to-Date  500.00	Date of Receipt  M M M / D D / 2 5
Full Name (Last, First, Middle Initial) ELIZABETH HOLLOWAY  Mailing Address 9222 RANDLE VALLE  City CORDOVA  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	Y DR  State Zip Code TN 38018  C  Occupation ASSISTANT GENERAL COUNSEL  Aggregate Year-to-Date ▼  800.00	Date of Receipt  M M Z D Z D Z D Z D Z D D Z D Z D D Z D Z
SUBTOTAL of Receipts This Page (optional)		75.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS  Any information copied from such Reports	for each category of the Detailed Summary Page  and Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 302 / 438 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ng the name and address of any political committee to a	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MATTHEW HOLMES Mailing Address 789 WESTON PA	ARK DR	Date of Receipt
		09 25 2010
City POWELL	State Zip Code OH 43065	Transaction ID: INC.A.87535  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C +3003	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK Mailing Address 5 SUNCLIFF DR		Date of Receipt
City	State Zip Code	0 9 2 5 2 0 1 0  Transaction ID: INC.A.87607
TARRYTOWN FEC ID number of contributing federal political committee.	NY 10591	Amount of Each Receipt this Period  80.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INTERVENTION DELIVERY SYST	- г
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) RITA HOLT		Date of Receipt
Mailing Address 1558 N PISGAH	ROAD	09 25 2010
City	State Zip Code	Transaction ID: INC.A.87911
CORDOVA	TN 38016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP REIMBURSEMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)	155.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 303 / 438 (check only one)    X
, C	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MS CYNTHIA HORN  Mailing Address 9553 ANDREW DR			Date of Receipt
				09 25 2010
	City	State OH	Zip Code	Transaction ID: INC.A.87898
	TWINSBURG FEC ID number of contributing federal political committee.	C	44087	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CUS		
	Receipt For: Primary General		e Year-to-Date ▼	1
_	Under (specify) ▼  Full Name (Last, First, Middle Initial)  MR STEVEN HOROWITZ	0 0		Date of Receipt
•	Mailing Address 4 MELISSA COURT	0 9 25 2010		
	City	State	Zip Code	Transaction ID: INC.A.87824
	MONTVILLE	NJ	07045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS		NESS PLANNING	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	7
	Other (specify)		1000.00	
	Full Name (Last, First, Middle Initial) LYNN HOSTMYER	•		Date of Receipt
	Mailing Address 6708 N.W. 112TH			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87917
	OKLAHOMA CITY	OK	73162	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer ACCREDO HEALTH GROUP	<del>, '</del>	AL MGR - MULTI BRANCH	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			125.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 304 / 438 (check only one)    X
Ar	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) MR BERNARD HUKILL Mailing Address 17219 CLOVIS  City HELOTES FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Zip Code 78023 n NRM OPS 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
В.	Other (specify) ▼  Full Name (Last, First, Middle Initial) MR JEFFREY HULL  Mailing Address 2616 S 3B'S & K RD  City GALENA  FEC ID number of contributing federal political committee.	State OH	Zip Code 43021	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
_	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)		n HLTH CARE OPS e Year-to-Date ▼ 640.00	
C.	MR DONALD HUMPHREY  Mailing Address 93 WINCHESTER DRI  City  MONROE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State NY  C Occupation SR DIR	Zip Code 10950  n TECHNOLOGY 2 Year-to-Date	Date of Receipt  M M M
s	Primary General Other (specify) ▼  UBTOTAL of Receipts This Page (optional)	000	500.00	107.00

SCHEDULE A (FEC FOITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 305 / 438 (check only one)    X   11a
NAME OF COMMITTEE (In Fu	II)	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle In MRS KIMBERLY HUMPHRIES  Mailing Address 10010 POI  City  LAKELAND  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify)	State TN  C  Occupation VP BUS  Aggregate	Zip Code 38002 on INESS PLANNING e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87934  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle In MR DAVID ISRAEL  Mailing Address 730 COLU  City  NEW YORK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTION:  Receipt For:  Primary General Other (specify)	State NY  C  Occupation VP INT'L	Zip Code 10025  on STAKEHOLDER RELATIO e Year-to-Date ▼ 1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle In MS SUSAN ITO  Mailing Address 6366 SW 9  City  GAINESVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTION  Receipt For:  Primary General Other (specify)	OTH STREET  State FL  C  Occupation EXEC D  Aggregate	Zip Code 32608  on IR CLINICAL SVCS e Year-to-Date ▼ 950.00	Date of Receipt    M   M   25   2010   Transaction ID: INC.A.87286   Amount of Each Receipt this Period   50.00
SUBTOTAL of Receipts This Pag	e (optional)		150.00

SCHEDULE A (FEC Form	134)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 306 / 438   (check only one)
Any information copied from such Report for commercial purposes, other than	orts and Statements may using the name and add	r 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 SOLUTION	S INC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS MARIANNE JACKS			Date of Receipt
Mailing Address 329 MORRIS	AVENUE		09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87326
MOUNTAIN LAKES	NJ	07046	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	. ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) BRENDA JACKSON			Date of Receipt
Mailing Address 1841 BROADI	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.87831
MIDDLEBURG	FL	32068	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n PRODUCT DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS TERESE JACKSON			Date of Receipt
Mailing Address 6085 S. PRES	TON LANE		09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87352
NEW BERLIN	WI	53151	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS		ACCT EXEC	
Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	-
Other (specify) ▼		500.00	
	ptional)		125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 307 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any persor ress of any political committee to	
MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS MICHELLE JAEGER			Date of Receipt
Mailing Address 302 HERMAN TERRA	CE		M M / D D / Y Y Y Y Y O D D / 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.87788
HOPKINS	MN	55343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	ACCT EXEC	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	]
Full Name (Last, First, Middle Initial) MR JASON JAMES	1		Date of Receipt
Mailing Address RR 2 BOX 2036			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.87279
CANADENSIS	PA	18325	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHY:	SICIAN ENGAGEMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) MR TODD JEFFREY			Date of Receipt
Mailing Address 15 ELIZABETH STREE	ET		09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87728
DUMONT	NJ	07628	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHAP	M CONTRACT & CONSUL	TING
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	110.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	f	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 308 / 438 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and addres	s of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ROBERT JINKS Mailing Address 22 PAGE AVE			Date of Receipt  0 9 2 5 2 0 1 0
City LYNDHURST  FEC ID number of contributing	State NJ	Zip Code 07071	Transaction ID: INC.A.87341  Amount of Each Receipt this Period  50.00
Receipt For:  Primary  Other (specify) ▼	Occupation	SS REQUIREMENTS ar-to-Date ▼ 1000.00	1
Full Name (Last, First, Middle Initial) MR WILLIAM JOEL Mailing Address 32 VENTOSA DR			Date of Receipt  0 9 2 5 2 0 1 0
City MORRISTOWN  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07960	Transaction ID: INC.A.87521  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR ANALY Aggregate Yea	TICAL SVCS ar-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) CHARLES JOHNSON Mailing Address 8277 FLORAL SPR	IINGS		Date of Receipt
City  CORDOVA  FEC ID number of contributing federal political committee.	State TN	Zip Code 38016	Transaction ID: INC.A.87875  Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR FINANC	DE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l)		100.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 309 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL ACTION COMMITTEE (a.k.a	Medco Health PAC)			
Full Name (Last, First, Middle Initial) LATASHA JONES		Date of Receipt			
Mailing Address 7761 THUNDERS		09 / 25 / Y Y Y Y			
City MEMPHIS	State Zip Code TN 38125	Transaction ID: INC.A.87946  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PAYER CONTRACTING				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) MRS REGINA JONES	MRS REGINA JONES				
Mailing Address POST OFFICE BC	Mailing Address POST OFFICE BOX 38342				
City GERMANTOWN	State Zip Code TN 38183	Transaction ID: INC.A.87450  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	75.00			
Name of Employer ACCREDO HEALTH GROUP	Occupation VP CUST SVC				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	]			
Full Name (Last, First, Middle Initial)  MR RICHARD JONES		Date of Receipt			
Mailing Address 12224 MONTCALI					
City	State Zip Code	Transaction ID: INC.A.87663			
CARMEL  FEC ID number of contributing federal political committee.	IN 46032	Amount of Each Receipt this Period  25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  975.00				
SUBTOTAL of Receipts This Page (option	al)	125.00			
	mber only)				

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 310 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to NC. POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD Mailing Address 16357 VICTORIA	CURVE SE	Date of Receipt
City PRIOR LAKE	State Zip Code MN 55372	Transaction ID: INC.A.87510  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR CLIENT & MKT PROG STR  Aggregate Year-to-Date   850.00	RAT
Full Name (Last, First, Middle Initial) MR HECTOR JUST Mailing Address 5329 BAYSHORE	BLVD.	Date of Receipt  0 9 2 5 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.87664
TAMPA  FEC ID number of contributing federal political committee.	FL 33611	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation DIR FACILITY PLANNING & DESIG  Aggregate Year-to-Date ▼	GN
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) MR DENNIS KACKLEY	N EN DD	Date of Receipt
Mailing Address 32 EAST RIVERG		09 / 25 / 2010
City WORTHINGTON	State Zip Code OH 43085	Transaction ID: INC.A.87586  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUST SVC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 487.50	
	•	•

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 311 / 438 (check only one)    X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\angle$	MEDCO HEALTH SOLUTIONS INC. Full Name (Last, First, Middle Initial)	POLITICAL	ACTION COMMITTEE (a.k.a	<u>,                                      </u>
•	MR JOHN KAPIOSKI  Mailing Address 8202 MARSH GLEN (	СТ		Date of Receipt    M   M   D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.87640  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n PHARMACY COMPLIANCE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) MR STEVEN KARATY Mailing Address 19 PARK AVE	· · · · · · · · · · · · · · · · · · ·		Date of Receipt
				0 9 25 2010
	City POMPTON PLAINS	State NJ	Zip Code 07444	Transaction ID: INC.A.87298  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0,777	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP OPS	n PLANNING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) MS BECKY KAUS Mailing Address N81 W18359 TOURS	DR		Date of Receipt  0 9 2 5 2 0 1 0
	City	State	Zip Code	0 9 2 5 2 0 1 0  Transaction ID: INC.A.87490
	MENOMONEE FALLS	WI	53051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	_ '	CLINICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	UBTOTAL of Receipts This Page (optional) .			100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 312 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.		
∆.	Full Name (Last, First, Middle Initial)  MR WILLIAM KEELER	- CEITIONE /	TOTTOTT COMMITTEE (a.m.a	Date of Receipt		
	Mailing Address 63 MOUNTAIN GLEN	ROAD		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.87750  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	n CAL SPECIALIST			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00			
- 3.	Full Name (Last, First, Middle Initial) MS DEEPTI KEHOE  Mailing Address 995 PINES TERR			Date of Receipt		
	City	State	Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87392		
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN	on IANCIAL & ANALYTICAL SV	c		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00			
- :.	Full Name (Last, First, Middle Initial) MS MICHELLE KEHOE					
	Mailing Address 26-1 FARMHOUSE LA	NE		09 / 25 / Y Y Y Y Y		
	City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.87318  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	07000	25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ENT	n ERPRISE BUSINESS INTEL	<u>-</u>   _L		
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00			
	SUBTOTAL of Receipts This Page (optional)			100.00		
	TOTAL This Period (last page this line number	only)				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 313 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III  Mailing Address 1970 WOODLANDS F	21		Date of Receipt
		-L		09 25 2010
	City POWELL	State OH	Zip Code 43065	Transaction ID: INC.A.87577
	FEC ID number of contributing federal political committee.	C	43063	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENER/	n AL MGR GROUP	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) MR KEVIN KELLY			Date of Receipt
	Mailing Address 251 POPLAR AVE	09 25 2010		
	City	State	Zip Code	Transaction ID: INC.A.87324
	HACKENSACK	NJ	07601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 500.00	1
	Other (specify) ▼		300.00	
_ С.	Full Name (Last, First, Middle Initial) MR PETER KENNY	•		Date of Receipt
	Mailing Address 6040 BOULEVARD E	APT 28G		09 25 2010
	City WEST NEW YORK	State NJ	Zip Code	Transaction ID: INC.A.87698
	FEC ID number of contributing federal political committee.	C	07093	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on ACCT MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
ı	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 314 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any perso dress of any political committee to	
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS INNA KHANIN			Date of Receipt
Mailing Address 3403 SPRINGBRO	OK DRIVE		09 25 7 2010
City	State	Zip Code	Transaction ID: INC.A.87780
EDISON	NJ	08820	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	]
Full Name (Last, First, Middle Initial) MS DONNA KLEIN	I		Date of Receipt
Mailing Address 1080 FOREST CLIF	F DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87896
LAKEWOOD	OH	44107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	CT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER	<b>L</b>		Date of Receipt
Mailing Address 121 CONKLING TO	WN ROAD		09 / 25 / 2010
City	State	Zip Code	Transaction ID: INC.A.87712
CHESTER	NY	10918	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
			100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 315 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
ļ	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a.	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) KENNETH KLEPPER			Date of Receipt
	Mailing Address 295 GLEN PLACE			09 / 25 / 2010
	City	State	Zip Code	Transaction ID: INC.A.87763
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRFS &	n CHIEF OPERATING OFFICE	<del>-</del> =R
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	3846.00	
В.	Full Name (Last, First, Middle Initial) RICHARD KLUSOVSKY			Date of Receipt
	Mailing Address 1016 FAIRWOOD LAN	IE		09 / 25 / 2010
	City	State	Zip Code	Transaction ID: INC.A.87924
	ACWORTH	GA	30101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation AVP MA	n NAGED CARE	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		500.00	
С.	Full Name (Last, First, Middle Initial) MS LORI KOEHNEN			Date of Receipt
<b>O</b> .	Mailing Address 6920 DYLAN LANE			0 9 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87551
	INDEPENDENCE	MN	55359	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n GENERIC STRAT & CUST D	V
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
	SUBTOTAL of Receipts This Page (optional)			242.30
			·	
	TOTAL This Period (last page this line number of	only)	<b>&gt;</b>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 316 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ 4.	Full Name (Last, First, Middle Initial) MR BRADFORD KOGEN		torrorr domini rez (a.n.a	Date of Receipt
	Mailing Address 555 FORBUSH STREE		7:01	09 / 25 / 2010
	City BOONTON	State NJ	Zip Code 07005	Transaction ID: INC.A.87701  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	n CLIENT RETAIL	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI Mailing Address 920 CLARK STREET			Date of Receipt
	City	State	Zip Code	0 9 2 5 2 0 1 0
	BOWLING GREEN	OH	43402	Transaction ID: INC.A.87358  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	n L ACCT EXEC	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
- ).	Full Name (Last, First, Middle Initial) MS ANNE KRAFT			Date of Receipt
	Mailing Address 28 ROSEMILT PLACE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MORRISTOWN	State NJ	Zip Code	Transaction ID: INC.A.87853
	FEC ID number of contributing federal political committee.	C	07960	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MAF	n RKET SEGMENT SOLUTION	- IS
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
T	TOTAL This Period (last page this line number)	only)		

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  Any information copied from such Reports and St	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 317 / 438 (check only one)    X
	or for commercial purposes, other than using the  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY  Mailing Address 143 DEERFIELD TERF	RACE		Date of Receipt
			7in Codo	09 25 2010
	City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.87401  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR PRODUCT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
В.	Full Name (Last, First, Middle Initial) MR ALEXANDER KRYNICKI Mailing Address 60 BEECH ROAD			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.87300  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 TECHNOLOGY	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) MS BARBARA KRZAK			Date of Receipt
	Mailing Address 495 ISLAND WAY			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87617
	FRANKLIN LAKES  FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period  55.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFC	on O TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)		<b>)</b>	105.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 318 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	name and address of any	political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN  Mailing Address 2735 YORK RD  City COLUMBUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)   Other (specify)	State Zip Coo OH 43221  C Occupation SVP MEMBER SVO Aggregate Year-to-Date	cs	Date of Receipt  M M M / 25 / 2010  Transaction ID: INC.A.87678  Amount of Each Receipt this Period  200.00
Full Name (Last, First, Middle Initial) MR DEEPAK KUMAR  Mailing Address 50 MANCHESTER CT  City KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Coo NJ 07405  C  Occupation DIR TECHNOLOG  Aggregate Year-to-Date	Y	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR MANOJ KUMAR  Mailing Address 7 SUNRISE WAY  City TOWACO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Coo NJ 07082  C  Occupation BUSINESS PROCE Aggregate Year-to-Dat	ESS CHAMPION	Date of Receipt  M M M / D D / 25 / 2010  Transaction ID: INC.A.87605  Amount of Each Receipt this Period  30.00
SUBTOTAL of Receipts This Page (optional)		<b>-</b>	255.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	III 3A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 319 / 438   (check only one)		
Any information copied from such Report for commercial purposes, other than	ports and Statements may n using the name and add	not be sold or used by any persolress 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 SOLUTION	NS INC. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Full Name (Last, First, Middle Initia MR MARK LANDY	1)		Date of Receipt		
Mailing Address 18 LADIK 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.87612		
MONTVALE  FEC ID number of contributing federal political committee.	NJ C	07645	Amount of Each Receipt this Period  75.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SVC I	DELIVERY SYSTEM			
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1500.00			
Full Name (Last, First, Middle Initial JAMES LANGLEY	<u> </u>   (l		Date of Receipt		
Mailing Address 10921 MAIN	Mailing Address 10921 MAIN RANGE TRAIL				
City LITTLETON	State CO	Zip Code 80127	Transaction ID: INC.A.87926  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	33127	50.00		
Name of Employer ACCREDO HEALTH GROUP	Occupation SVP FINA	ANCIAL ADMIN			
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initia MR EDWARD LAPUSHCHIK	<u> </u>		Date of Receipt		
Mailing Address 2 OLD LANE			M M / D D / Y Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City MONTVILLE	State NJ	Zip Code 07045	Transaction ID: INC.A.87775		
FEC ID number of contributing federal political committee.	C	07045	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	CAL SPECIALIST			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (	optional)		150.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 320 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	Statements may not be sold or used by any person and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MARCELO LAROSA Mailing Address 162 HILLTOP ROAD  City MONROE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10950  C  Occupation SR DIR CLIENT SVC DELIVERY Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / 2 5
Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER Mailing Address 1100 KIMBERLY COL  City ROSEVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code CA 95661  C  Occupation SR DIR GOVERNMENT AFFAIRS  Aggregate Year-to-Date  2000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 2 5 2 0 1 0  Transaction ID: INC.A.87566  Amount of Each Receipt this Period  100.00
Full Name (Last, First, Middle Initial)  MICHELE LAW  Mailing Address 600 KINGFRED DR  City  NORTH HUNTINGDON  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify)	State Zip Code PA 15642  C  Occupation DIR TRC  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / 2 5 / 2 0 1 0  Transaction ID: INC.A.87927  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)		150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 321 / 438   (check only one)		
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Full Name (Last, First, Middle Initial) PAUL LEAPO			Date of Receipt		
Mailing Address 1 CHRISTIAN DRIV	/E		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.87760		
EAST BRUNSWICK FEC ID number of contributing federal political committee.	NJ C	08816	Amount of Each Receipt this Period  26.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 1	TECHNOLOGY			
Receipt For:  Primary  General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 520.00			
Full Name (Last, First, Middle Initial) JOSEPH LENZ			Date of Receipt		
Mailing Address 1735 LINKENHOLT	Mailing Address 1735 LINKENHOLT COVE				
City COLLIERVILLE	State TN	Zip Code 38017	Transaction ID: INC.A.87800		
FEC ID number of contributing federal political committee.	C	30017	Amount of Each Receipt this Period  50.00		
Name of Employer ACCREDO HEALTH GROUP	Occupation VP PERF	ORMANCE STRATEGY			
Receipt For:  Primary General  Other (specify)		Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) EMMA LEVIN			Date of Receipt		
Mailing Address 18 SALEM RD			09 25 2010		
City EAST BRUNSWICK	State NJ	Zip Code 08816	Transaction ID: INC.A.87828		
FEC ID number of contributing federal political committee.	C	00010	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 ▼ 500.00			
SUBTOTAL of Receipts This Page (optional	J)		101.00		

ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 322 / 438   (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DORIAN LO			Date of Receipt
Mailing Address 202 MORRIS AVE	NUE		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.87569
MOUNTAIN LAKES  FEC ID number of contributing federal political committee.	NJ C	07046	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIN	n ICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR ROBERT LONG			Date of Receipt
Mailing Address 18 HARLIND TERF	RACE		0 9 2 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RAMSEY	State <b>NJ</b>	Zip Code 07446	Transaction ID: INC.A.87554
FEC ID number of contributing federal political committee.	C	07440	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	n - ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼	
Full Name (Last, First, Middle Initial) DAVID LOSCHINSKEY			Date of Receipt
Mailing Address 4500 MT GILLESP	IE DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LAKELAND	State TN	Zip Code	Transaction ID: INC.A.87931
FEC ID number of contributing federal political committee.	C	38002	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP BIAC		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	-0		150.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	5X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 323 / 438   (check only one)
Any information copied from such Reports or for commercial purposes, other than using	and Statements may r	not be sold or used by any perso ess 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 II	NC. POLITICAL AC	CTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR BRICE LOVE			Date of Receipt
Mailing Address 2390 BRANDON	RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COLUMBUS	State OH	Zip Code 43221	Transaction ID: INC.A.87514  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40221	12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TR	 3C	
Receipt For:  Primary General  Other (specify)		Year-to-Date ▼ 487.50	
Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
Mailing Address 1066 WEST GRO	VE CT		0 9 2 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.87412  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13044	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		7
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 1170.00	
Full Name (Last, First, Middle Initial) MS SHARON MACCOY			Date of Receipt
Mailing Address 9248 TALWAY C	IR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BOYNTON BEACH	State FL	Zip Code 33472	Transaction ID: INC.A.87555
FEC ID number of contributing federal political committee.	C	33472	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES	8	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 475.00	
SUBTOTAL of Receipts This Page (optio	nal)		67.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 324 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS VERONA MACMAHON Msiling Address	L A \ / \( \)		Date of Receipt
	Mailing Address 1504 WEST CULLOM UNIT G	IAVE		09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87729
	CHICAGO  FEC ID number of contributing federal political committee.	C	60613	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		
	Receipt For:	<del> </del>	ACCT MGMT OPS  e Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	500.00	
- В.	Full Name (Last, First, Middle Initial) MR KENNETH MALLEY			Date of Receipt
	Mailing Address 764 W. SADDLE RIVE	09 25 2010		
	City	State	Zip Code	Transaction ID: INC.A.87452
	HO HO KUS	NJ	07423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS		SENERAL MGR	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2420.00	
c. –	Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO	•		Date of Receipt
	Mailing Address 33 HICKORY TAVERI	N RD		M M / D D / Y Y Y Y Y Y Y Y Y Z D 1 0
	City	State	Zip Code	Transaction ID: INC.A.87288
	GILLETTE	NJ	07933	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			267.00
	TOTAL This Period (last page this line number		<u> </u>	

NAME OF COME Pull Name (I JOE MARAE Mailing Add City WYCKOF FEC ID nun federal politic Name of En MEDCO HE Receipt For Prima Other Full Name (I MS ILENE MEDCO MS ILENE MEDCO MS ILENE MEDCO MS ILENE MEDCO MS ILENE MEDCO MS ILENE MEDCO MS ILENE MEDCO MS ILENE MEDCO MED MAILENE MEDCO MED MEDCO MED MEDCO MED MEDCO MED MEDCO MED MEDCO MED MEDCO MED MEDCO MED MEDCO MED MEDCO MED MEDCO MED MEDCO MED MEDCO MEDICAL MEDI	COMMITTEE (In Full) HEALTH SOLUTIONS INC.  Last, First, Middle Initial) BITO  ress 637 WYCKOFF AVEN UNIT 351  FF Inber of contributing ical committee.  Inployer EALTH SOLUTIONS  : ry General (specify)  Last, First, Middle Initial)	POLITICAL A  NUE  State  NJ  C  Occupatio  VP CON	ACTION COMMITTEE (a.k.a Zip Code 07481	Date of Receipt  Date of Receipt INC.A.87852  Amount of Each Receipt this Period  Date of Receipt 25.00
Full Name (I JOE MARAE Mailing Add  City WYCKOF FEC ID nun federal politi  Name of En MEDCO HE  Receipt For Prima Other  Full Name (I MS ILENE M Mailing Add	HEALTH SOLUTIONS INC.  Last, First, Middle Initial) BITO  ress 637 WYCKOFF AVEN  UNIT 351  F  The of contributing ical committee.  Inployer EALTH SOLUTIONS  :  rry General (specify)  Last, First, Middle Initial)  HARCUS	State NJ C Occupatio VP CON	Zip Code 07481 0 SUMER DRIVEN MKTS 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
JOE MARAE  Mailing Add  City  WYCKOF  FEC ID nun federal politi  Name of En MEDCO HE  Receipt For  Prima Other  Full Name (i MS ILENE M  Mailing Add	ress 637 WYCKOFF AVENUNIT 351  Finder of contributing ical committee.  Inployer EALTH SOLUTIONS  : ry General (specify)  Last, First, Middle Initial)  IARCUS	State NJ C Occupatio VP CON	07481  n SUMER DRIVEN MKTS  Year-to-Date ▼	Transaction ID: INC.A.87852  Amount of Each Receipt this Period  25.00
City WYCKOF FEC ID nun federal politi Name of En MEDCO HE Receipt For Prima Other  Full Name ( MS ILENE M Mailing Add	UNIT 351  Finber of contributing ical committee.  Inployer EALTH SOLUTIONS  :  Irry General (specify)   Last, First, Middle Initial)  IARCUS	State NJ C Occupatio VP CON	07481  n SUMER DRIVEN MKTS  Year-to-Date ▼	Transaction ID: INC.A.87852  Amount of Each Receipt this Period  25.00
WYCKOF FEC ID nun federal politi  Name of En MEDCO HE  Receipt For Prima Other  Full Name ( MS ILENE M  Mailing Add	nber of contributing ical committee.  nployer = ALTH SOLUTIONS  : ry	Occupatio VP CON	07481  n SUMER DRIVEN MKTS  Year-to-Date ▼	Amount of Each Receipt this Period  25.00
Receipt For Prima Other  Full Name ( MS ILENE M	nber of contributing ical committee.  nployer = ALTH SOLUTIONS  : ry	Occupatio VP CON	n SUMER DRIVEN MKTS Year-to-Date ▼	25.00
Receipt For Prima Other  Full Name (I MS ILENE M Mailing Add	: ry General (specify) ▼  Last, First, Middle Initial)  MARCUS	VP CON	SUMER DRIVEN MKTS  Year-to-Date ▼	Date of Receipt
Full Name ( MS ILENE M Mailing Add	ry General (specify) ▼  Last, First, Middle Initial) IARCUS	Aggregate		Date of Receipt
MS ILENE M Mailing Add	MARCUS			Date of Receipt
Mailing Add				
City				09 25 2010
-	IFF LAKE DR	State NJ	Zip Code 07675	Transaction ID: INC.A.87628  Amount of Each Receipt this Period
	nber of contributing ical committee.	C		25.00
Name of En MEDCO HE	nployer EALTH SOLUTIONS	Occupatio SR DIR I	n FINANCE	
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 500.00	
	Last, First, Middle Initial) HMARINELLI			Date of Receipt
Mailing Add	ress 351 SOUND BEACH	AVENUE		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.87397
OLD GRE		CT	06870	Amount of Each Receipt this Period
	nber of contributing ical committee.	C		25.00
Name of En MEDCO HE	nployer EALTH SOLUTIONS	Occupatio SR DIR I	n MEDICARE OPS	
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 500.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 326 / 438 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		,	, 
LORI MARINO  Mailing Address 31 UNDERWOOD DR	RIVE		Date of Receipt  0 9 2 5 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87849
WEST ORANGE	NJ	07052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST GI	n ENERAL COUNSEL	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL-IGUNBOR Mailing Address W144 N7150 TERRAC	CE DRIVE		Date of Receipt
011	01-1-	7' - 0 - 1 -	09 25 2010
City MENOMONEE FALLS	State WI	Zip Code	Transaction ID: INC.A.87486
FEC ID number of contributing federal political committee.	C	53051	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR JOSEPH MARSIGLIANO			Date of Receipt
Mailing Address 11 ECHO HILL ROAD	1		09 / 25 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87851
MONTVALE	NJ	07645	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n FECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	]
SUBTOTAL of Receipts This Page (optional)	1	<b>)</b>	125.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 327 / 438 (check only one)    X		
A	Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
۷.	Full Name (Last, First, Middle Initial) SHELLY MARTIN			Date of Receipt		
	Mailing Address 9536 DOE MEADOW	DR		09 / 25 / Y Y Y Y		
	City	State	Zip Code	Transaction ID: INC.A.87937		
	GERMANTOWN	TN	38139	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HR	n			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		500.00			
_	Full Name (Last, First, Middle Initial) MR TODD MARTIN			Date of Receipt		
	Mailing Address 11825 SHEPPARDS	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.87431		
	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 SVP & G	n GENERAL MGR			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General  Other (specify) ▼		3846.00			
	Full Name (Last, First, Middle Initial) MR WILLIAM MARTIN	Date of Receipt				
•						
	City	State	Zip Code	Transaction ID: INC.A.87857		
	GERMANTOWN	TN	38139	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer ACCREDO HEALTH GROUP	Occupation GROUP	n VP BUS DEV			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		1000.00			
Г	SUBTOTAL of Receipts This Page (optional)			267.30		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 328 / 438 (check only one)    X
or for commercial purposes, other than usin	and Statements may not be sold or used by any perso g the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR EDWARD MARTINEZ Mailing Address 35 SALTER PLAC  City		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
MAPLEWOOD  FEC ID number of contributing federal political committee.	State Zip Code NJ 07040	Transaction ID: INC.A.87784  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR PRODUCT MGMT  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) MR JEFFREY MAY Mailing Address 137 WASHINGTC	N AVE	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: INC.A.87665
HILLSDALE  FEC ID number of contributing federal political committee.	NJ 07642	Amount of Each Receipt this Period  192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHARMA STRAT & SOLUTIONS	<del>-</del>
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3846.00	
Full Name (Last, First, Middle Initial) MR TERENCE MAYTIN		Date of Receipt
Mailing Address 496 FRANKLIN A	/E	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WYCKOFF	State Zip Code NJ 07481	Transaction ID: INC.A.87425  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 E-COM STRATEGY & DELIVERY	,
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	nal)	242.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 329 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any personal the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE Mailing Address 19 FARMINGTON	COURT State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RAMSEY	NJ 07446	Transaction ID: INC.A.87463
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	Occupation VP SALES AND MARKETING Aggregate Year-to-Date  1000.00	
Full Name (Last, First, Middle Initial) THOMAS MCCANN Mailing Address 9600 DOVE SPRIN	G CV	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.87939
GERMANTOWN	TN 38139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP SALES	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MS SHANNON MCCRUDDEN		Date of Receipt
Mailing Address 8309 SANCTUARY	BLVD	09 25 2010
City RIVERDALE	State Zip Code NJ 07457	Transaction ID: INC.A.87785  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 PRICING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		125.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 330 / 438 (check only one)    X   11a
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	solicit contributions from such committee.
<u>L</u>	Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD Mailing Address 0-45 27TH ST  City	State	Zip Code	Date of Receipt    M
	FAIR LAWN FEC ID number of contributing federal political committee.	NJ C	07410	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	++	n SHNOLOGY • Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH Mailing Address 87 ROSELAWN RD			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City HIGHLAND MILLS	State NY	Zip Code 10930	Transaction ID: INC.A.87565
	FEC ID number of contributing federal political committee.	C	10930	Amount of Each Receipt this Period 192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST GI	n ENERAL COUNSEL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3840.00	
	Full Name (Last, First, Middle Initial) MR WILLIAM MCLAUGHLIN Mailing Address 8 BATES CIRCLE			Date of Receipt  0 9 2 5 2 0 1 0
	City FLORIDA	State NY	Zip Code 10921	Transaction ID: INC.A.87740
	FEC ID number of contributing federal political committee.	C	10921	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		242.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 331 / 438 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA Mailing Address 112 GREEN TERRAC  City WEST MILFORD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State NJ  C  Occupation SVP BUS	Zip Code 07480  n SINESS OPS e Year-to-Date	Date of Receipt    M M
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR EDWARD MCNEILEY  Mailing Address 2623 KENCHESTER  City WESLEY CHAPEL  FEC ID number of contributing federal political committee.	State FL	Zip Code 33543	Date of Receipt  M M M / D D / Y Y Y Y Y  0 9 2 5 2 0 1 0  Transaction ID: INC.A.87460  Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) CRAIG MEARS	_, -	n ARM PRACTICE 9 Year-to-Date ▼  487.50	Date of Receipt
Mailing Address 106 MEADOWLAKE  City  HENDERSONVILLE  FEC ID number of contributing federal political committee.	State TN	Zip Code 37075	Transaction ID: INC.A.87910  Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify) ▼	Occupation PRESIDE Aggregate		
SUBTOTAL of Receipts This Page (optional)			254.81

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 332 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MRS WENDY MELLO	20		Date of Receipt
	Mailing Address 5147 BLUE SPRUCE [ City	OK State	Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87367
	YPSILANTI	MI	48197	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MK1	n FING & STRATEGIC ANAL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00	
В.	Full Name (Last, First, Middle Initial) MS LAURA MENVILLE			Date of Receipt
	Mailing Address 23 UNION HILL RD			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87752
	MORRIS PLAINS	NJ	07950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) MS BARBARA MENZEL			Date of Receipt
	Mailing Address 921 AMARYLLIS AVE			09 25 2010
	City ORADELL	State	Zip Code	Transaction ID: INC.A.87349
	FEC ID number of contributing federal political committee.	NJ C	07649	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n BUS PLANNING & ADMIN	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
	SUBTOTAL of Receipts This Page (optional)			70.00
	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 333 / 438 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DANETTE MEREDITH Mailing Address 600 W 2ND AVE			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  DERRY  FEC ID number of contributing federal political committee.	State PA	Zip Code 15627	Transaction ID: INC.A.87901  Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	Occupation AVP SAL Aggregate		1
Full Name (Last, First, Middle Initial) MR JEFFREY MESAROS Mailing Address 10565 96TH ST NC	PRTH		Date of Receipt  0 9 2 5 2 0 1 0
City  LARGO  FEC ID number of contributing federal political committee.	State FL	Zip Code 33773	Transaction ID: INC.A.87537  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation ATTORN Aggregate		
Full Name (Last, First, Middle Initial) MR DAN MILKENS Mailing Address 826 DOWNING ST	REET		Date of Receipt
City NORTHBROOK  FEC ID number of contributing federal political committee.	State IL	Zip Code 60062	Transaction ID: INC.A.87552  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP SALE Aggregate		
SUBTOTAL of Receipts This Page (optional	l)		75.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 334 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17	
7	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.	
<b>A</b> .	Full Name (Last, First, Middle Initial) DAVID MILLER  Mailing Address 7 CLOVER LANE  City RANDOLPH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C	Zip Code 07869	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 2 5 2 0 1 0  Transaction ID: INC.A.87297  Amount of Each Receipt this Period  50.00	
_	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00		
В.	Full Name (Last, First, Middle Initial) MRS KAREN MILLER Mailing Address 34 MACKENZIE LANE	NORTH		Date of Receipt  0 9 2 5 2 0 1 0	
	City	State	Zip Code	Transaction ID: INC.A.87287	
	DENVILLE  FEC ID number of contributing federal political committee.	C	07834	Amount of Each Receipt this Period  50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n IR INTERNAL AUDIT	7	
	Receipt For: Primary General Other (specify)		e Year-to-Date 1000.00		
- C.	Full Name (Last, First, Middle Initial)	Date of Receipt			
<b>.</b>		PAMELA MILLER  Mailing Address 158 SUMMIT AVENUE			
	City	State	Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87773	
	HACKENSACK	NJ	07601	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		55.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SUS	on TAIN & COMMUNITY INVES	т	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00		
	SUBTOTAL of Receipts This Page (optional)			155.00	
	TOTAL This Period (last page this line number of	only)			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	fo	se separate schedule(s) or each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 335 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and address	of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR GIOVANNI MINARDI Mailing Address 12 LINCOLN ROA	D		Date of Receipt  0 9 2 5 2 0 1 0
City KINNELON FEC ID number of contributing	State NJ	Zip Code 07405	Transaction ID: INC.A.87738  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  Other (specify)   General	Occupation SR DIR TEC Aggregate Yea		1
Full Name (Last, First, Middle Initial)  MR BHUPESH MISTRY  Mailing Address 92 REDSTONE DF	3		Date of Receipt  0 9 2 5 2 0 1 0
City PARSIPPANY FEC ID number of contributing	State NJ	Zip Code 07054	Transaction ID: INC.A.87307  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  General	Occupation	SPECIALIST r-to-Date ▼	
Other (specify)  Full Name (Last, First, Middle Initial) MR DAVID MITCHELL		500.00	Date of Receipt
Mailing Address 222 WEST 14TH S APT. 4B			0 9 2 5 2 0 1 0
City  NEW YORK  FEC ID number of contributing federal political committee.	State NY	Zip Code 10011	Transaction ID: INC.A.87798  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING	& PRODUCT DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (options	al)		100.00

or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person to name and address of any political committee to ename and address of any po	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MONALISA MOHANTY Mailing Address 1574 WHITMAR PLACE City MEMPHIS FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP	State Zip Code TN 38120  C  Occupation DIR MARKETING  Aggregate 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
MONALISA MOHANTY  Mailing Address 1574 WHITMAR PLACE  City  MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP	State Zip Code TN 38120  C  Occupation DIR MARKETING  Aggregate Year-to-Date	Transaction ID: INC.A.87884  Amount of Each Receipt this Period
City  MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP	State Zip Code TN 38120  C  Occupation DIR MARKETING  Aggregate Year-to-Date	Transaction ID: INC.A.87884  Amount of Each Receipt this Period
MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP	TN 38120  C  Occupation DIR MARKETING  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP	Occupation DIR MARKETING Aggregate Year-to-Date	
	DIR MARKETING  Aggregate Year-to-Date ▼	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) MS JULIANA MOLEK		Date of Receipt
Mailing Address 8620 LAKE RILEY DF	RIVE	09 25 2010
City	State Zip Code	Transaction ID: INC.A.87440
CHANHASSEN  FEC ID number of contributing federal political committee.	MN 55317	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR SPECIAL MARKETS	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) ROBERT MOLONEY	Date of Receipt	
Mailing Address 24 ABBINGTON TERI	RACE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GLEN ROCK	State Zip Code NJ 07452	Transaction ID: INC.A.87816  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		100.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 337 / 438 (check only one)    X   11a
An	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	o solicit contributions from such committee.
<b>∠_</b> <b>4</b> .	Full Name (Last, First, Middle Initial) MR ERICK MONCAYO  Mailing Address 404 HAMILTON AVE  City GLEN ROCK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS		CLINICAL THERAPEUTICS	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.	Receipt For: Primary General Other (specify)   Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE	Aggregate	e Year-to-Date ▼ 500.00	Date of Receipt
_	Mailing Address 1320 BRONCO CIR  City  WARRINGTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		Zip Code 18976 on TECHNOLOGY e Year-to-Date ▼	Transaction ID: INC.A.87448  Amount of Each Receipt this Period  25.00
·.	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY  Mailing Address 86 WELLINGTON AVE  City SHORT HILLS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State NJ  C  Occupatio GENL C-	Zip Code 07078 on -SEC-SVP PHARM STRAT S 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
s	UBTOTAL of Receipts This Page (optional)			242.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 338 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers he name and address of any political committee to	
MEDCO HEALTH SOLUTIONS INC.	. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS THERESA MORMILE Mailing Address 59 VALLEY VIEW T		Date of Receipt
City	State Zip Code	0 9 2 5 2 0 1 0  Transaction ID: INC.A.87666
MONTVALE	NJ 07645	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR CRAIG MORRIS		Date of Receipt
Mailing Address N 49 W 25648 MCKI	ERROW DR	09 / 25 / 4 2010
City	State Zip Code	Transaction ID: INC.A.87485
PEWAUKEE	WI 53072	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR CLINICAL SVCS	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General  Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) JACQUELINE MORRIS		Date of Receipt
Mailing Address 750 COLUMBUS AV APT 06S		09 / 25 / Y Y Y Y
City NEW YORK	State Zip Code NY 10025	Transaction ID: INC.A.87864  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 INT'L BUSINESS DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 339 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and address of	any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR 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)			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR PHILLIP MUELLER Mailing Address 16329 RIVERBIRCH D  City MARYSVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zi <sub>l</sub>	o Code 3040 SVCS	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.87538  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR ROBERT MULLER Mailing Address 69 FERN PLACE  City PARAMUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	NJ 07	CLIENT ENROLLMN D-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 25 2010  Transaction ID: INC.A.87683  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)		·····	95.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 340 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any period the name and address of any political committee.  IC. POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MRS KATHLEEN MURPHY  Mailing Address 206 TARRYTOWN	N DRIVE	Date of Receipt  0 9 2 5 2 0 1 0
City RICHMOND FEC ID number of contributing	State Zip Code VA 23229	Transaction ID: INC.A.87688  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR ACCT MGMT OPS Aggregate Year-to-Date ▼  225.00	25.00
Full Name (Last, First, Middle Initial)  MS BECKY NAGLE  Mailing Address 64 WALTER AVE		Date of Receipt  0 9 2 5 2 0 1 0
City  HASBROUCK HEIGHTS  FEC ID number of contributing federal political committee.	State Zip Code NJ 07604	Transaction ID: INC.A.87356  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation VP CLINICAL SVCS  Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial)  MR ANDREW NANICK  Mailing Address 220 LAUREL BAY	DRIVE	Date of Receipt
City MURRELLS INLET	State Zip Code SC 29576	Transaction ID: INC.A.87361  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR CLINICAL SVCS	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)	100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 341 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma le name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) JANARDHAN NARAYANAN			Date of Receipt
	Mailing Address 32 BLACKSTONE DF	RIVE		09 25 2010
	City PRINCETON	State NJ	Zip Code 08540	Transaction ID: INC.A.87861
	FEC ID number of contributing federal political committee.	C	00040	Amount of Each Receipt this Period  29.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on MARKET STRATEGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 630.00	
В.	Full Name (Last, First, Middle Initial) MS BARBARA NEAVERTH Mailing Address PO BOX 523			Date of Receipt
				09 25 2010
	City SUGAR LOAF	State NY	Zip Code 10981	Transaction ID: INC.A.87332  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	on BUSINESS REQUIREMENT	S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
C.	Full Name (Last, First, Middle Initial) BRIAN NEMIROFF	<u>'</u>		Date of Receipt
	Mailing Address 335 VILLAGE PLACE	Ī		09 25 2010
	City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.87862  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07401	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ORG		
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			79.00
	TOTAL This Period (last page this line numbe	er only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 342 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to a political committee to a political committee to a political committee (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) CHRISTIAN NICKERSON Mailing Address 20 MELVILLE ROAD  City PRINCETON JCT  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 08550  C  Occupation SR DIR ENTERPRISE BUS INTELLIG Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87859  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR MICHAEL NICODEMO Mailing Address 407 MEER AVE  City WYCKOFF  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07481  C  Occupation VP INFO TECHNOLOGY  Aggregate Year-to-Date  950.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87720  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  MS EVELYN NIXON  Mailing Address 10011 BELLONA CT  City  HENRICO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code VA 23233  C  Occupation DIR ACCT MGMT OPS  Aggregate Year-to-Date   500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 343 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MS ARLENE NOLAN Meiling Address (240 DOCERT AVENUE)	<u> </u>		Date of Receipt
	Mailing Address 319 BOGERT AVENU  City	State	Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87399
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) MR HAIK NOVSHADIAN Mailing Address 45 DAVIS ROAD	1		Date of Receipt
	Mailing Address 45 DAVIS ROAD			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87489
	<u>SPARTA</u>	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		38.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLII	on NICAL THERAPEUTICS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 760.00	]
с. С.	Full Name (Last, First, Middle Initial) MS JANINE NOWATZKY			Date of Receipt
	Mailing Address 24 CHEROKEE TRAIL	_		0 9 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87553
	OAKLAND	NJ	07436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on MARKET STRATEGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
	SUBTOTAL of Receipts This Page (optional)			118.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 344 / 438 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DENISE O'CALLAGHAN Mailing Address 4 HIGHLAND AVE P.O. BOX 408 City PEAPACK FEC ID number of contributing	State NJ	Zip Code 07977	Date of Receipt    M M
Receipt For:  Primary  Other (specify) ▼	Occupatio VP OPS	n  • Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial) MR ROBERT O'CONNELL Mailing Address 12001 PEONY CT  City TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State FL  C  Occupatio DIR SEC  Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 25 2010  Transaction ID: INC.A.87394  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) SUSAN O'CONNOR  Mailing Address 5 HICKORY DRIVE  City NANUET  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 10954 n MEDICAL 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
SUBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 345 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	
MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER  Mailing Address 6 PARK DR SOUTH		Date of Receipt
City	State Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87699
RYE	NY 10580	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP COO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR SUNNY OGBONDA		Date of Receipt
Mailing Address 79 LAUREL WOOD		09 / 25 / Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.87310
ROCKAWAY TOWNSHIP	NJ 07866	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS REQUIREMENTS	
Receipt For: Primary General	Aggregate Year-to-Date ▼	7
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) MR MELVIN OHL		Date of Receipt
Mailing Address 274 E FRANKLIN TF	KE	09 / 25 / Y Y Y Y Y
City RIDGEWOOD	State Zip Code NJ 07450	Transaction ID: INC.A.87637  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 PROCUREMENT & INVENTORY	,
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
CURTOTAL of Descints This Description II		125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 346 / 438 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR BRYAN OLENIK			Date of Receipt
Mailing Address 653 E. DEVON DRIVE			0 9 2 5 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87680
GILBERT	AZ	85296	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n IRM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) MRS SUE OLIVER			Date of Receipt
Mailing Address 11 LEE DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87647
NORTH HALEDON	NJ	07508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC D	n IR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 950.00	
Full Name (Last, First, Middle Initial) MS CLAUDINE OLSEN			Date of Receipt
Mailing Address 4 HIGHGATE 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.87692
SUFFERN	NY	10901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio NATL AC	n CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			87.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 347 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
. ∠ <b>.</b> .	Full Name (Last, First, Middle Initial) MS PATRICE OLSON		torion domini i i i i i i i i i i i i i i i i i i	Date of Receipt
	Mailing Address 9933 TOLEDO DRIVE			09 25 7 2010
	City BROOKLYN PARK	State MN	Zip Code 55443	Transaction ID: INC.A.87710  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	n ACCT MGMT	7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) MS CYNTHIA O'NEILL  Mailing Address 69 SUMMIT AVE			Date of Receipt
	City	State	Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87622
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n & INSTALLATION SVCS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	]
_	Full Name (Last, First, Middle Initial) ALEXANDER ONIK			Date of Receipt
	Mailing Address 1 SCHINDLER CT			09 25 2010
	City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.87806  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07430	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 348 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS NATALYA ONIK			Date of Receipt
Mailing Address 1 SCHINDLER CT	0 9 2 5 2 0 1 0		
City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.87524
FEC ID number of contributing federal political committee.	C	07436	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BIAC	n C SYSTEMS SOLUTIONS	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR KIPP OTTLEY	<b>I</b>		Date of Receipt
Mailing Address 672 PETWORTH	СТ		0 9 2 5 2 0 1 0
City POWELL	State OH	Zip Code 43065	Transaction ID: INC.A.87449
FEC ID number of contributing federal political committee.	C	45005	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HI T	n H CARE OPS	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS DAWN PAGANO			Date of Receipt
Mailing Address 185 PASCACK RC	DAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PARK RIDGE	State NJ	Zip Code 07656	Transaction ID: INC.A.87625
FEC ID number of contributing federal political committee.	C	07030	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP		
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 950.00	
SUBTOTAL of Receipts This Page (option	nal)		100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 349 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MR RICHARD PAGANO Mailing Address 105 DAGGACK DD			Date of Receipt
	Mailing Address 185 PASCACK RD			09 25 2010
	City	State NJ	Zip Code	Transaction ID: INC.A.87618
	PARK RIDGE  FEC ID number of contributing federal political committee.	C	07656	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	on BUSINESS REQUIREMENTS	<del>-</del> S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE	Date of Receipt		
	Mailing Address 12 MILLBROOK COUR	09		
	City	State	Zip Code	Transaction ID: INC.A.87512
	LIVINGSTON	NJ	07039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP RETI	n REE SOLUTIONS MKTG	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
- : <u>.</u>	Full Name (Last, First, Middle Initial) MR RICHARD PALOMBO	Date of Receipt		
	Mailing Address 19 E. HOLLYWOOD L.	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City BEESLEY'S POINT	State NJ	Zip Code 08223	Transaction ID: INC.A.87758  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00225	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n PHARMACY REGULATORY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number of			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 350 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)  MR JUN PARK  Mailing Address 2843 HONEYSUCKLE	LANE		Date of Receipt
		LAINE		09 25 2010
	City HILLIARD	State OH	Zip Code 43026	Transaction ID: INC.A.87796
	FEC ID number of contributing federal political committee.	C	45020	Amount of Each Receipt this Period  12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINE	on SS PROCESS CHAMPION	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
В.	Full Name (Last, First, Middle Initial) MS GIRA PATEL	Date of Receipt		
	Mailing Address 5 FOXHILL RUN			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87506
	MONMOUTH JUNCTION  FEC ID number of contributing federal political committee.	NJ C	08852	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	BUSINESS REQUIREMENTS	S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
_ С.	Full Name (Last, First, Middle Initial) MR JAY PATEL	Date of Receipt		
	Mailing Address 14 BROWNSTONE T	09 25 2010		
	City HAWTHORNE	State NJ	Zip Code 07506	Transaction ID: INC.A.87792  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 TEC	on CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			62.50
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 351 / 438 (check only one)    X   11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) MR MATTHEW PATELLA			Date of Receipt
	Mailing Address 30 TAM O SHANTER	DRIVE		09 / 25 / 2010
	City <u>MAHWAH</u>	State NJ	Zip Code 07430	Transaction ID: INC.A.87334  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NAT	n L ACCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Б.	Full Name (Last, First, Middle Initial) MR PAVLOS PAVLIDIS	Date of Receipt		
	Mailing Address 2780 FOLKSTONE R	09 25 7 2010		
	City COLUMBUS	State OH	Zip Code 43220	Transaction ID: INC.A.87370  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	.ozzo	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 975.00	
с.	Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI	Date of Receipt		
	Mailing Address 211 WILTSIE COUR	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.87468  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07401	30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	on O TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
	SUBTOTAL of Receipts This Page (optional)	1		105.00
f	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 352 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MERRI PENDERGRASS, MD  Mailing Address 3201 QUEENSBURY  City COLLEYVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State TX C Occupation VP NATI	Zip Code 76034 n ONAL PRACTICE LEADER e Year-to-Date ▼	Date of Receipt  M M M / D D / 2 5 / 2 0 1 0  Transaction ID: INC.A.87873  Amount of Each Receipt this Period  50.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) MR VICTOR PERINI  Mailing Address 9304 GROVE PARK (  City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify) ▼	State TN  C  Occupation VP TRC	Zip Code 38139 n	Date of Receipt  M M / D D / Y Y Y Y Y  O 9
Full Name (Last, First, Middle Initial)  JIMMY PERREN  Mailing Address 1250 BRAY PARK DE  City  COLLIERVILLE  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General Other (specify)	State TN C Occupation VP REGI	Zip Code 38017  n ULATORY COMPLIANCE Year-to-Date ▼ 1500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .			175.00

or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	State Zip Code	Date of Receipt  9 9 9 2 5 2 0 1 0		
Full Name (Last, First, Middle Initial) MR MICHAEL PETEROY Mailing Address 4769 STAVANGER L City	ANE State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	09 25 2010		
	NV 89147	Transaction ID: INC.A.87603  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		25.00		
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation DIR PRODUCT DEVELOPMENT  Aggregate Year-to-Date   500.00			
Full Name (Last, First, Middle Initial) MR NATHAN PETERSON Mailing Address 1520 PEMBROKE PA	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.87481		
CHANHASSEN  FEC ID number of contributing federal political committee.	MN 55317	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) MR THOMAS PETTYES Mailing Address 8522 UPLAND LN NO				
City	·			
MAPLE GROVE  FEC ID number of contributing federal political committee.	MN 55311	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	100.00		

on copied from such Reports and cial purposes, other than using the COMMITTEE (In Full) HEALTH SOLUTIONS INC.  (Last, First, Middle Initial) PELIEGER dress 44 HENRY TERRACE  N PARK mber of contributing tical committee.  mployer EALTH SOLUTIONS r: ary General r (specify)  (Last, First, Middle Initial) PICONE dress 37 TAMARACK DRIV  SUNNA mber of contributing	POLITICAL A  State NJ  C  Occupation SR ATTC Aggregate  /E  State NJ	Zip Code 07035	Date of Receipt  Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
(Last, First, Middle Initial) PFLIEGER  dress 44 HENRY TERRACE  N PARK  mber of contributing tical committee.  mployer IEALTH SOLUTIONS  r: ary General r (specify)  (Last, First, Middle Initial) PICONE  dress 37 TAMARACK DRIV	State NJ  C  Occupation SR ATTO Aggregate  /E  State NJ	Zip Code 07035 DRNEY Year-to-Date ▼  Zip Code	Date of Receipt    M   M   25   2010   Transaction ID: INC.A.87839   Amount of Each Receipt this Period   25.00    Date of Receipt   25   2010   Transaction ID: INC.A.87754
DEFLIEGER  dress 44 HENRY TERRACE  N PARK  mber of contributing tical committee.  mployer IEALTH SOLUTIONS  r: ary General r (specify)  (Last, First, Middle Initial) PICONE  dress 37 TAMARACK DRIV	State NJ  C  Occupation SR ATTC Aggregate  /E  State NJ	07035  DRNEY  Year-to-Date ▼  Zip Code	Date of Receipt   Date of Re
N PARK  mber of contributing tical committee.  mployer IEALTH SOLUTIONS  r: ary General r (specify) ▼  (Last, First, Middle Initial) PICONE dress 37 TAMARACK DRIV	State NJ  C  Occupation SR ATTC Aggregate  /E  State NJ	07035  DRNEY  Year-to-Date ▼  Zip Code	Date of Receipt  Date of Receipt  Transaction ID: INC.A.87839  Amount of Each Receipt this Period  25.00  Date of Receipt  Transaction ID: INC.A.87754
mber of contributing tical committee.  mployer IEALTH SOLUTIONS  r: ary General r (specify) (Last, First, Middle Initial) PICONE dress 37 TAMARACK DRIV	Occupation SR ATTC Aggregate  /E  State NJ	07035  DRNEY  Year-to-Date ▼  Zip Code	Transaction ID: INC.A.87839  Amount of Each Receipt this Period  25.00  Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
mber of contributing tical committee.  mployer IEALTH SOLUTIONS  r: ary General r (specify) (Last, First, Middle Initial) PICONE dress 37 TAMARACK DRIV	Occupation SR ATTO Aggregate  /E  State NJ	PRNEY Year-to-Date ▼  500.00	Date of Receipt    M
mployer IEALTH SOLUTIONS  r: ary General r (specify)   (Last, First, Middle Initial) PICONE dress 37 TAMARACK DRIV	Occupation SR ATTO Aggregate  /E State NJ	PRNEY Year-to-Date ▼  500.00  Zip Code	Date of Receipt  0 9 25 2010  Transaction ID: INC.A.87754
r: ary General r (specify)  (Last, First, Middle Initial) PICONE dress 37 TAMARACK DRIV	SR ATTC Aggregate  /E State NJ	PRNEY Year-to-Date ▼  500.00  Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87754
ary General r (specify) ▼  (Last, First, Middle Initial) PICONE dress 37 TAMARACK DRIV	ZE State NJ	500.00 Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87754
PICONE dress 37 TAMARACK DRIV	State NJ	•	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87754
dress 37 TAMARACK DRIV	State NJ	•	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87754
	NJ	•	
		07876	Amount of Each Receipt this Period
mber of contributing			
tical committee.	С		25.00
mployer EALTH SOLUTIONS	Occupation DIR TECI	n HNOLOGY	
r: ary General r (specify) ♥	Aggregate	Year-to-Date ▼ 500.00	
(Last, First, Middle Initial) AS PIERCE			Date of Receipt
dress 10297 E. LAKE DR.			09 25 YYYYY
	State	Zip Code	Transaction ID: INC.A.87827
VOOD	CO	80111	Amount of Each Receipt this Period
mber of contributing tical committee.	C		50.00
mployer EALTH SOLUTIONS			
r: ary General r (specify) <b>▼</b>	Aggregate	Year-to-Date ▼ 1000.00	
	AS PIERCE  dress 10297 E. LAKE DR.  /OOD  mber of contributing tical committee.  mployer EALTH SOLUTIONS  r: ary General	AS PIERCE  dress 10297 E. LAKE DR.  State CO  mber of contributing tical committee.  mployer EALTH SOLUTIONS  r: Aggregate  Aggregate	AS PIERCE  dress 10297 E. LAKE DR.  State Zip Code CO 80111  The proof contributing tical committee.  The proof of contributing tical committee tical comm

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 355 / 438 (check only one)    X
or for	nformation copied from such Reports and commercial purposes, other than using the AME OF COMMITTEE (In Full)	Statements manne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
\	IEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
DI	ıll Name (Last, First, Middle Initial) R PAGE PIGG ailing Address 9297 ANGLER TRL			Date of Receipt
Ci	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	State	Zip Code	0 9 2 5 2 0 1 0  Transaction ID: INC.A.87478
<u>M</u>	IECHANICSVILLE	VA	23116	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		25.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio DIR CLIN	n NICAL SVCS	
Re	eceipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
M	JII Name (Last, First, Middle Initial) S JUDITH PLATKIN			Date of Receipt
Ma	ailing Address 29 BLACKWELL AVE			09 25 2010
Ci	itv	State	Zip Code	Transaction ID: INC.A.87290
	IORRISTOWN	NJ	07960	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		192.30
	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio SVP & G	n ENERAL MGR	
Re	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		3846.00	
	Ill Name (Last, First, Middle Initial) R RICHARD PONESSE	Date of Receipt		
Ma	ailing Address 10 DISTILLERY PAT	09 25 2010		
Ci	ity EWBURGH	State NY	Zip Code 12550	Transaction ID: INC.A.87731
FE	EVBORGH  EC ID number of contributing deral political committee.	C	12330	Amount of Each Receipt this Period  30.00
_	ame of Employer CCREDO HEALTH GROUP	Occupatio VP PRIC		
Re	eceipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.00	
CUD	STOTAL of Receipts This Page (optional)			247.30

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 356 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
_	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS JANET PORAT			Date of Receipt
	Mailing Address 5 CRABAPPLE CT	01-1-	7'. 0.4.	09 25 2010
	City MONSEY	State NY	Zip Code 10952	Transaction ID: INC.A.87427  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Б.	Full Name (Last, First, Middle Initial) MS LYDIA POTTER Mailing Address 19642 S.W. 88 LOOP	Date of Receipt		
		09 25 2010		
	City DUNNELLON	State FL	Zip Code 34432	Transaction ID: INC.A.87700
	FEC ID number of contributing federal political committee.	C	34432	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date ▼ 500.00	
_ С.	Full Name (Last, First, Middle Initial) MR NEIL PREZIOSO	Date of Receipt		
	Mailing Address 10258 WINDSOR WA	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City POWELL	State OH	Zip Code 43065	Transaction ID: INC.A.87587  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	CDP		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional) .	1		100.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 357/438   (check only one)		
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE			Date of Receipt		
Mailing Address 875 ALEXANDRIA (	CT		09 25 7 2010		
City RAMSEY	State NJ	Zip Code	Transaction ID: INC.A.87536		
FEC ID number of contributing federal political committee.	C	07446	Amount of Each Receipt this Period  192.30		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP HR	ו			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3846.00			
Full Name (Last, First, Middle Initial) MR ROBERT PRITCHET			Date of Receipt		
Mailing Address 135 HOLLYBERRY	Mailing Address 135 HOLLYBERRY DRIVE				
City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.87654		
FEC ID number of contributing federal political committee.	C	12500	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	ONTRACT ADMINISTRAT	ION		
Receipt For:  Primary  General  Other (specify)		Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) MR JASON PROULX	Date of Receipt				
Mailing Address 3601 LEANNE DRIV	M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City FLOWER MOUND	State TX	Zip Code 75022	Transaction ID: INC.A.87753		
FEC ID number of contributing federal political committee.	C	75022	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n PLANNING			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00			
SUBTOTAL of Receipts This Page (optional	ı		267.30		

SCHEDULE A (FEC FO ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Page	e (check only one)			
or for commercial purposes, other the	eports and Statements may not be sold or used by any an using the name and address of any political common NS INC. POLITICAL ACTION COMMITTEE	nittee to solicit contributions from such committee.			
Full Name (Last, First, Middle Ini MR MARK PROULX Mailing Address 20 BRANDY	RIDGE ROAD	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 <u>S</u> PARTA	State Zip Code NJ 07871	Transaction ID: INC.A.87746  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	192.31			
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation CHIEF OF OPERATIONS Aggregate Year-to-Date  3846.2	20			
Full Name (Last, First, Middle Ini MS CATHERINE PURDUE Mailing Address 318 NEWBU	Date of Receipt  0 9 2 5 2 0 1 0				
City	State Zip Code	Transaction ID: INC.A.87682			
MONROEVILLE	PA 15146	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS DEV				
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.0	00			
Full Name (Last, First, Middle Ini	Full Name (Last, First, Middle Initial) SYED QUADRI				
Mailing Address 6040 KENN APT 30N	Mailing Address 6040 KENNEDY BLVD EAST				
City WEST NEW YORK	State Zip Code NJ 07093	Transaction ID: INC.A.87737			
FEC ID number of contributing federal political committee.	NJ 07093	Amount of Each Receipt this Period  25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRIVACY				
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.0	00			
		242.31			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 359 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL  City KELLER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code TX 76248  C  Occupation DIR HR  Aggregate Year-to-Date ▼  975.00	Date of Receipt  M M C 25
Full Name (Last, First, Middle Initial)  MS FRANCES RAO  Mailing Address 19 ROSS ROAD  City  SCARSDALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NY 10583  C  Occupation EXEC DIR REGULATORY  Aggregate Year-to-Date   1500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y  2 5 / 2 0 1 0  Transaction ID: INC.A.87327  Amount of Each Receipt this Period  75.00
Full Name (Last, First, Middle Initial) MRS DOLORES RAPUANO Mailing Address 57660 BEAVER VA  City QUAKER CITY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code OH 43773  C  Occupation SR DIR ELIGIBILITY  Aggregate Year-to-Date   500.00	Date of Receipt  M M A Z D Z D Z D Z D D Z D D Z D D Z D D Z D D Z D D Z D D D Z D D D Z D
SUBTOTAL of Receipts This Page (optional	)	125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 360 / 438 (check only one)    X			
	and Statements may not be sold or used by any per ng the name and address of any political committee				
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL ACTION COMMITTEE (a.k.	.a. Medco Health PAC)			
Full Name (Last, First, Middle Initial) MRS MONICA REED		Date of Receipt			
Mailing Address 8475 DUNHAM S' City	TATION DRIVE State Zip Code	0 9 2 5 2 0 1 0  Transaction ID: INC.A.87532			
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 PROF PRA				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼				
Full Name (Last, First, Middle Initial) MS MARGARET REICHENBACHER		Date of Receipt			
Mailing Address 26 UNDERWOOD	D DR	09 25 2010			
City	State Zip Code	Transaction ID: INC.A.87550			
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 TECHNOLOGY				
Receipt For: Primary General	Aggregate Year-to-Date ▼	_			
Other (specify)	500.00				
Full Name (Last, First, Middle Initial) MRS HEATHER REIGLE	Date of Receipt				
Mailing Address 10816 BARBADO	Mailing Address 10816 BARBADOS ISLE DRIVE				
City	State Zip Code	Transaction ID: INC.A.87329			
TAMPA	FL 33647	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CUST SVC				
Receipt For: Primary General	Aggregate Year-to-Date ▼	_			
Other (specify)	500.00				
	nal)	100.00			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 361 / 438 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS Mailing Address 204 TOKENEKE RD  City DARIEN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State CT  C  Occupatio VP BIAC  Aggregate	e Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y  O 9 25 2010  Transaction ID: INC.A.87445  Amount of Each Receipt this Period  50.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) MR VICTOR RENNA  Mailing Address 8 CARLA ANN CT  City FLANDERS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State NJ C Occupatio	Zip Code 07836	Date of Receipt  M M / D D / Y Y Y Y Y  O 9 25 2010  Transaction ID: INC.A.87703  Amount of Each Receipt this Period  50.00
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) MRS YVETTE RENNIE Mailing Address 1 RED OAK LANE City KINNELON FEC ID number of contributing federal political committee.	Aggregate State NJ	Zip Code 07405	Date of Receipt  M M M / D D / Y Y Y Y Y  0 9
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	Aggregate	PRICING e Year-to-Date  ▼  500.00	125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 362 / 438 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR JOSEPH REYNOLDS  Mailing Address 412 RIVER MEWS LA  City  EDGEWATER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State NJ C Occupation EXEC DI	Zip Code 07020 n R TECHNOLOGY Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
Full Name (Last, First, Middle Initial) SUZANNE RICHARDS  Mailing Address 1398 SW PENISULA  City PALM CITY  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State FL C Occupation NATL AC	Zip Code 34990 n CCT MGR PHARM MANUFA Year-to-Date ▼	Date of Receipt  M M M / D D / 25
Full Name (Last, First, Middle Initial) MS ANGELA RIECK Mailing Address 5 EGBERT AVENUE  City MORRISTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	<del>_ ' '</del>	Zip Code 07960  n FORMANCE CONSULTING Year-to-Date  500.00	Date of Receipt  M M M 25 25 2010  Transaction ID: INC.A.87878  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional) .			120.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 363 / 438 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS JACQUELINE RIMSKY Mailing Address 13 HILLCREST RO	AD	Date of Receipt  0 9 2 5 2 0 1 0
City TOWACO FEC ID number of contributing	State Zip Code NJ 07082	Transaction ID: INC.A.87817  Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation DIR FINANCE Aggregate Year-to-Date ▼	25.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR WILLIAM RINCON	475.00	Date of Receipt
Mailing Address 32 CLINTON VIEW  City  HEWITT  FEC ID number of contributing	State Zip Code NJ 07421	Transaction ID: INC.A.87578  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  Other (specify) ▼	Occupation DIR BUSINESS REQUIREMENTS Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) ELIZABETH RITCHIE Mailing Address 27 DAY RD		Date of Receipt  0 9 2 5 2 0 1 0
City PLEASANT VALLEY FEC ID number of contributing federal political committee.	State Zip Code CT 06063	Transaction ID: INC.A.87832  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR BUSINESS DEVELOPMENT Aggregate Year-to-Date  1000.00	
SUBTOTAL of Receipts This Page (optional		100.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 364 / 438 (check only one)    X   11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)  MS VIRGINIA RIVAS  Mailing Address 7845 E 5TH ST			Date of Receipt
		01-1-	7's Oads	09 25 2010
	City DOWNEY	State CA	Zip Code 90241	Transaction ID: INC.A.87293  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) MR DAVID ROBARGE			Date of Receipt
	Mailing Address 4565 QUEENSLAND	LIN IN		09 25 2010
	City MINNEAPOLIS	State MN	Zip Code 55446	Transaction ID: INC.A.87375  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33770	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n CLINICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
C.	Full Name (Last, First, Middle Initial) MRS JENNIFER ROBERTS			Date of Receipt
	Mailing Address 1342 DALTON CT			0 9 2 5 2 0 1 0
	City FAIRFIELD	State OH	Zip Code 45014	Transaction ID: INC.A.87415  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70017	12.50
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 487.50	
	SUBTOTAL of Receipts This Page (optional)	1		62.50
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 365 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
2	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
<b>A</b> .	Full Name (Last, First, Middle Initial) MS TRACEY RODGERS-LENGE Mailing Address 19 FARMINGTON CO	URT		Date of Receipt  0 9 2 5 2 0 1 0
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.87299  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLIN	n NICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) MS SORAYA RODRIGUEZ-BALZAC Mailing Address 22 PAPOOSE TRAIL			Date of Receipt
	City	State	Zip Code	09 25 2010
	ANDOVER	NJ	07821	Transaction ID: INC.A.87767  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n MARKETING	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- ;.	Full Name (Last, First, Middle Initial) ERIC ROELOFS			Date of Receipt
-	Mailing Address 9 STRATFORD WAY			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City MORRIS PLAINS	State NJ	Zip Code 07950	Transaction ID: INC.A.87870  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n CHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sche for each category Detailed Summary	of the
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and address of any political c	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO Mailing Address 855 CLUB MOSS CT		Date of Receipt
		09 25 2010
City MARIETTA	State Zip Code GA 30068	Transaction ID: INC.A.87443
FEC ID number of contributing federal political committee.	GA 30068	Amount of Each Receipt this Period  192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRESIDENT SYSTEMED	
Receipt For:  Primary General  Other (specify) ▼		46.00
Full Name (Last, First, Middle Initial) DAVID ROOT	L	Date of Receipt
Mailing Address 212 SPRING BRANC	H ROAD	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WAVERLY	State Zip Code VA 23890	Transaction ID: INC.A.87847  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 STATE GOVERNMEN	T AFFAIRS
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	00.00
Full Name (Last, First, Middle Initial) MS DONNA ROSEN	L	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 Zip Code NJ 07405	Transaction ID: INC.A.87655  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-CLINICAL TECH	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	00.00
SUBTOTAL of Receipts This Page (optional)	1	267.30

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 367 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	
	C. POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) DR CHRISTINE ROTTAS Mailing Address 7227 RAMOTH DR	IIVF	Date of Receipt
City	State Zip Code	0 9 2 5 2 0 1 0  Transaction ID: INC.A.87402
JACKSONVILLE	FL 32226	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation  EXEC DIR FORMULARY CONSULTII	NG
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MS LAUREN RUBENSTEIN		Date of Receipt
Mailing Address 345 WINTHROP D		09 25 2010
City	State Zip Code	Transaction ID: INC.A.87702
NUTLEY	NJ 07110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) MR RICHARD RUBINO		Date of Receipt
Mailing Address 3 APACHE DRIVE		09 / 25 / 2010
City <u>OAKLAND</u>	State Zip Code  NJ 07436	Transaction ID: INC.A.87651  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	193.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FINANCE & CHIEF FIN OFFCR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3860.00	
CURTOTAL of Passints This Pass (autism)	al)	268.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 368 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P			
Full Name (Last, First, Middle Initial) MR STEVEN RUSSEK Mailing Address 21 SKY TOP RIDGE		` 	Date of Receipt
Maining Address 21 SKY TOP RIDGE			09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87470
OAKLAND	NJ	07436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupation VP CLIN	CAL MGMT & SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MS KAREN RUSSELL			Date of Receipt
Mailing Address 148 CLUBHOUSE DR			M M / D D / Y Y Y Y O D O D O D O D O D O D O D O D
City WEST COLUMBIA	State SC	Zip Code 29172	Transaction ID: INC.A.87321  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 (	CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS KATHERYN RUSSI			Date of Receipt
Mailing Address 5965 VILLAGE CIRCLE	Ē		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.87343
JOHNSTON	IA	50131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			125.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 369 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDICO HEALTH SOLUTIONS INC. 1	Statements may not be sold or used by any perso e name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR ANTHONY RUSSO  Mailing Address 66 FINCH RD	(u	Date of Receipt
	Otata Zin Cada	09 25 2010
City RINGWOOD	State Zip Code NJ 07456	Transaction ID: INC.A.87597  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROF PRA	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  MS JENNIFER RUSSO		Date of Receipt
Mailing Address 35 DEAN ST.		0 9 2 5 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.87789
GLEN ROCK	NJ 07452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MARKETING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	
Full Name (Last, First, Middle Initial) JULIANA RUTH		Date of Receipt
Mailing Address 1 UNDERCLIFF TERF	RACE	09 / 25 / Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.87881
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 SR DIR BUSINESS DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	·····	125.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 370 / 438 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR JESSE RUZICKA  Mailing Address 334 MORRIS AVE			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BOONTON FEC ID number of contributing	State NJ	Zip Code 07005	Transaction ID: INC.A.87790  Amount of Each Receipt this Period  30.00
Receipt For:  Primary  Other (specify)	Occupation NATL AC	n CCT EXEC e Year-to-Date ▼	1
Full Name (Last, First, Middle Initial) MS MARY RYAN Mailing Address 456 RICHMOND A	VENUE		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  MAPLEWOOD  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07040	Transaction ID: INC.A.87644  Amount of Each Receipt this Period  78.34
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>- ' '</del>	n RMACY REGULATORY 9 Year-to-Date ▼ 1488.46	1
Full Name (Last, First, Middle Initial) MRS CYNTHEA RYDER Mailing Address 74 CHOCTAW TRA	AIL		Date of Receipt
City RINGWOOD  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07456	Transaction ID: INC.A.87308  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		OM STRAT & DELIV	
Primary General Other (specify) ▼	Aygregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		133.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 371 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MISS CYNTHIA RYLANDS Mailing Address 4836 MIDDLE RD  City ALLISON PARK FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	<del>_ ' '</del>	Zip Code 15101  on SINESS REQUIREMENTS e Year-to-Date   500.00	Date of Receipt  M M / D D / Y Y Y Y Y  O 9 25 2010  Transaction ID: INC.A.87681  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR RYAN SADLER Mailing Address 85 VANCE ST. #201  City MEMPHIS FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	<del>_ ' '</del>	Zip Code 38103  on VERNMENT AFFAIRS e Year-to-Date ▼ 500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
Full Name (Last, First, Middle Initial) CHRISTOPHER SANDERS  Mailing Address 7475 MINK HOLLOW  City HIGHLAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State MD  C  Occupation DIR CAC		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line number			75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 372 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE Mailing Address 7 AHERN WAY  City WEST ORANGE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07052 n ENTERPRISE BUS INTELLI e Year-to-Date ▼	Date of Receipt  M M M / D D / 2 5
Full Name (Last, First, Middle Initial) MR MATTHEW SARDY  Mailing Address 230 FAIRFIELD AVE.  City RIDGEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupation VP FINA  Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y  O 9 25 2010  Transaction ID: INC.A.87380  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MS BETH SAVARE  Mailing Address 27 JONES LN  City BLAIRSTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07825 n PHARM OPS e Year-to-Date ▼	Date of Receipt  M M M / D D / 25
SUBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MS TRINA SAYLER			Date of Receipt
Mailing Address 56 LAKESIDE DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87723
RAMSEY	NJ	07446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) MR MITCHELL SCHERF			Date of Receipt
Mailing Address 739 CAMBERWELL D			09 / 25 / 2010
City EAGAN	State MN	Zip Code 55123	Transaction ID: INC.A.87467
FEC ID number of contributing federal political committee.	C	33123	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio NATL AC	on CCT EXEC	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial)  MR DAVID SCHLETT			Date of Receipt
Mailing Address 339 GRAMERCY PL			09 25 Y Y Y Y Y
City GLEN ROCK	State NJ	Zip Code	Transaction ID: INC.A.87650
FEC ID number of contributing federal political committee.	C	07452	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP FIN	on IANCIAL & ANALYTICAL SV	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		1000.00	
SUBTOTAL of Receipts This Page (optional)			90.00
TOTAL This Period (last page this line number	r only)	·	

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 374 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for co	ommercial purposes, other than using the ME OF COMMITTEE (In Full)	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
→ ME	DCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
<b>A.</b> <u>MR</u>	Name (Last, First, Middle Initial) DENNIS SCHONBACHLER			Date of Receipt
	ing Address 6 TRIBECA AVE UNIT 207			09 25 2010
City	RSEY CITY	State NJ	Zip Code 07305	Transaction ID: INC.A.87844
FEC	CID number of contributing ral political committee.	C	07303	Amount of Each Receipt this Period  25.00
Nam MEI	ne of Employer DCO HEALTH SOLUTIONS	Occupatio DIR INTE	n ERNATIONAL MARKETS	
Rec	eipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Name (Last, First, Middle Initial) C SCHUPP			Date of Receipt
Mail	ing Address 340 S. MAIN			0 9 2 5 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.87858
	MPHIS	TN	38103	Amount of Each Receipt this Period
fede	CID number of contributing ral political committee.	C		25.00
Nam AC(	ne of Employer CREDO HEALTH GROUP	Occupatio DIR PRC	n DDUCT LINE II	
Rec	eipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)	0 0	500.00	
	Name (Last, First, Middle Initial) ALLEN SCHWARTZ			Date of Receipt
Mail	ing Address 9111 N KARLOV			0 9 2 5 2 0 1 0
City	OKIE	State IL	Zip Code	Transaction ID: INC.A.87371
FEC	CID number of contributing eral political committee.	C	60076	Amount of Each Receipt this Period  50.00
Nam MEI	ne of Employer DCO HEALTH SOLUTIONS	Occupatio EXEC DI	n IR CLINICAL SVCS	
Rec	eipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBT	OTAL of Receipts This Page (optional)			100.00
	L This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	fo	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 375 / 438 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and address	of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) BRUCE SCOTT Mailing Address 18650 BEARPATH	I TRAIL		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City EDEN PRAIRIE FEC ID number of contributing		Zip Code 55347	Transaction ID: INC.A.87872  Amount of Each Receipt this Period  192.31
Receipt For:  Primary  Other (specify) ▼  Rederal political committee.  Receipt For:  General	Occupation PRESIDENT Aggregate Year	-to-Date ▼ 3846.20	
Full Name (Last, First, Middle Initial) MS CYNTHIA SCOTT Mailing Address 18650 BEARPATH	I TRAIL		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City EDEN PRAIRIE		Zip Code 55437	Transaction ID: INC.A.87294  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL	PROG DEV	50.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year	-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT  Mailing Address 7330 EVEREST LA	ANE - NORTH		Date of Receipt  0 9 2 5 2 0 1 0
City MAPLE GROVE		Zip Code 55311	Transaction ID: INC.A.87705  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR NATL ACC		
Primary General Other (specify) ▼	Aggregate Teal	1000.00	
SUBTOTAL of Receipts This Page (option	al)		292.31

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 376 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
_	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
\ \ \.	Full Name (Last, First, Middle Initial)  MS MONICA SCOZZARE		TOTION GONNINT FEE (d.K.c	Date of Receipt
	Mailing Address 3021 E MILLCREEK R			09 25 2010
	City SALT LAKE CITY	State UT	Zip Code 84109	Transaction ID: INC.A.87284  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	04109	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	n IR CLINICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
3.	Full Name (Last, First, Middle Initial) MR ROBERT SENDEWICZ Mailing Address 1220 CROSSING WAY	,		Date of Receipt
	City	State	Zip Code	09 25 2010
	WAYNE	NJ	21p Code 07470	Transaction ID: INC.A.87331  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	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
- :	Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV			Date of Receipt
	Mailing Address 66 PROSPECT AVE			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87734
	WESTWOOD  FEC ID number of contributing federal political committee.	NJ C	07675	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUS	n INESS DEV	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
-	TOTAL This Period (last page this line number of			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 377 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal he name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS PATRICIA SGARELLA Mailing Address 275 MAIN STREET  City GLEN ROCK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07452  C  Occupation SR DIR PRICING  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / 2 5 / 2 0 1 0  Transaction ID: INC.A.87742  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 1767 FAIRMOUNT S  City CARMEL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	STREET  State Zip Code IN 46032  C  Occupation VP ONCOLOGY TRC OPS  Aggregate Year-to-Date   1800.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR ROBERT SHANNON Mailing Address 59 DANNER AVE  City HARRISON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10528  C  Occupation DIR FINANCE  Aggregate Year-to-Date   500.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)		80.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 3/8 / 438   (check only one)
Any information copied from such Re or for commercial purposes, other that	ports and Statements may n using the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTION	NS INC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initia MR JOHN SHEA	al)		Date of Receipt
Mailing Address 62 FRANKLII	N TURNPIKE		0 9 2 5 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87306
ALLENDALE  FEC ID number of contributing federal political committee.	NJ C	07401	Amount of Each Receipt this Period  40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CO		
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initia MR FRANK SHEEHY	,		Date of Receipt
Mailing Address 550 KNOLLV	/OOD ROAD		09 25 2010
City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.87391  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07400	192.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & G	n ENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	- + +	Year-to-Date ▼ 3840.00	
Full Name (Last, First, Middle Initia DAWN SHERMAN	al)		Date of Receipt
Mailing Address 63 BRAMSH	LL DRIVE		M M / D D / Y Y Y Y Y O D D / 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.87840  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07450	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP & CO	n O INTL STRATEGY & OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page	I		282.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 379 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial)  MR PETER SHERMAN  Mailing Address 139 GATES AVENUE	,		Date of Receipt
				09 25 2010
	City MONTCLAIR	State NJ	Zip Code 07042	Transaction ID: INC.A.87277
	FEC ID number of contributing federal political committee.	C	07042	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST GE	n ENERAL COUNSEL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
- В.	Full Name (Last, First, Middle Initial) WENDELL SHERRELL	<u> </u>		Date of Receipt
	Mailing Address PO BOX 748			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87868
	COLLIERVILLE	TN	38027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR ACC	n DDO CORP HR & TALENT N	ngT
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		540.00	
_ С.	Full Name (Last, First, Middle Initial) MR JAMES SHIVAS			Date of Receipt
	Mailing Address 18 PROSPECT AVE			0 9 2 5 2 0 1 0
	City NORTH ARLINGTON	State NJ	Zip Code 07031	Transaction ID: INC.A.87498  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07031	25.00
	Name of Employer ACCREDO HEALTH GROUP	Occupation DIR PRICE		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .			105.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	of the
Any information copied from such Reports or for commercial purposes, other than us	and Statements may not be sold or used bing the name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	INC. POLITICAL ACTION COMMITT	EE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ELWOOD SIDES III		Date of Receipt
Mailing Address 150 CLAREMON	IT AVE	09 25 2010
City LONG BEACH	State Zip Code CA 90803	Transaction ID: INC.A.87404  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 30003	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	00.00
Full Name (Last, First, Middle Initial) MS ANNE SIGILLITO		Date of Receipt
Mailing Address 67 FAIRHAVEN	DRIVE	0 9 D D C Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ALLENDALE	State Zip Code NJ 07401	Transaction ID: INC.A.87281
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR GENERIC STRAT 8	S CUST DV
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼	00.00
Full Name (Last, First, Middle Initial) MS JODI SILBERMANN	I	Date of Receipt
Mailing Address 16 TULIP LANE		0 9 2 5 2 0 1 0
City RANDOLPH	State Zip Code NJ 07869	Transaction ID: INC.A.87667  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
SUPTOTAL of Possints This Page (anti-	onal)	65.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 381 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and addi	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JEFFREY SIMEK  Mailing Address 3555 GRANDE TUSC  City NEW SMYRNA BEACH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State FL  C  Occupation VP CORF	Zip Code 32168  COMMUNICATIONS Year-to-Date ▼ 1585.86	Date of Receipt    M   M   D   D   D   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) MR LEE SIMON Mailing Address 2390 GREENVIEW R  City NORTHBROOK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State IL  C  Occupation VP/GM	Zip Code 60062 Year-to-Date ▼	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR JEFFREY SINKO  Mailing Address 10 CHERRY TREE LA  City KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupation ASST GE	Zip Code 07405 NERAL COUNSEL Year-to-Date ▼	Date of Receipt    M   M   D   D   D   2 5   2 0 1 0
SUBTOTAL of Receipts This Page (optional)			150.00

SCHEDULE A (FEC FO	rm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 382 / 438   (check only one)
Any information copied from such F or for commercial purposes, other the	eports and Statements manan using the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Ful MEDCO HEALTH SOLUTION	•	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle In MR WILLIAM SIRICO	tial)		Date of Receipt
Mailing Address 564 DALE (	COURT EAST		09 25 2010
City RIVER VALE	State NJ	Zip Code 07675	Transaction ID: INC.A.87330
FEC ID number of contributing federal political committee.	C	07675	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n FECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle In	tial)		Date of Receipt
Mailing Address 24 MAYBEI	RRY LANE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MECHANICSBURG	State PA	Zip Code 17050	Transaction ID: INC.A.87636
FEC ID number of contributing federal political committee.	C	17050	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n PHARMACY REGULATORY	,
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle In MR DAVID SITVER	tial)		Date of Receipt
Mailing Address 24 YORKSI	HIRE AVE		0 9 2 5 2 0 1 0
City SUFFERN	State NY	Zip Code 10901	Transaction ID: INC.A.87497
FEC ID number of contributing federal political committee.	C	10901	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n FECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page	(optional)		80.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 383 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) ARUNBABU SIVAGAMINATHAN			Date of Receipt
Mailing Address 11 LINDA CT			09 25 2010
City LINCOLN PARK	State <b>NJ</b>	Zip Code 07035	Transaction ID: INC.A.87818  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	<del>-                                    </del>	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MR BRADLEY SKATTER	<b> </b>		Date of Receipt
Mailing Address 6433 FRANKLIN H	ILLS RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City INDEPENDENCE	State MN	Zip Code 55359	Transaction ID: INC.A.87312  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	- <del>  '</del>	Year-to-Date ▼ 1000.00	]
Full Name (Last, First, Middle Initial) MR EDWARD SKRIPATA			Date of Receipt
Mailing Address 70 RIVER ROAD UNIT D9			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CLIFTON	State NJ	Zip Code 07014	Transaction ID: INC.A.87614  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0,014	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		100.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	M 3X)  Use separate sch for each category Detailed Summar	of the Crieck only one)
or for commercial purposes, other that NAME OF COMMITTEE (In Full)	n using the name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
MEDCO HEALTH SOLUTION	NS INC. POLITICAL ACTION COMMIT	TEE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initia  A. ANN SMITH	l)	Date of Receipt
Mailing Address 437 GLENDA		09 / 25 / 2010
City <u>WYCKOFF</u>	State Zip Code NJ 07481	Transaction ID: INC.A.87505  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PUBLIC AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	575.00
Full Name (Last, First, Middle Initia MR ROBERT SMITH Mailing Address 40 JOSHUA	· 	Date of Receipt
		09 25 2010
City RAMSEY	State Zip Code NJ 07446	Transaction ID: INC.A.87676  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	000.00
Full Name (Last, First, Middle Initia  C. MR ERIC SMITHER	J)	Date of Receipt
Mailing Address 1132 NORTH	ST RT 123	0 9 2 5 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.87422
LEBANON FEC ID number of contributing federal political committee.	OH 45036	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
SUBTOTAL of Receipts This Page (	optional)	112.50
	ne 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 385 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR		ACTION COMMITTEE (a.K.a	Date of Receipt
	Mailing Address 23 CEDAR GATE ROA  City	AD State	Zip Code	0 9 2 5 2 0 1 0
	DARIEN	CT	06820	Transaction ID: INC.A.87755  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHAIRM	on IAN & CEO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3846.20	
- В.	Full Name (Last, First, Middle Initial) MR ALAN SOKALER Mailing Address 30 MICHELLE WAY			Date of Receipt
	Walling / loar 655 50 WHOT ILLEE WAT			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87791
	PINE BROOK  FEC ID number of contributing federal political committee.	NJ C	07058	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- C.	Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE			Date of Receipt
	Mailing Address 6108 HUNTER LANE			0 9 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87589
	COLLEYVILLE	TX	76034	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 975.00	
	SUBTOTAL of Receipts This Page (optional)			267.31
f	TOTAL This Period (last page this line number	only)		

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 386 / 438 (check only one)    X
	nation copied from such Reports and S mercial purposes, other than using the OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	CO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
MS MIC	me (Last, First, Middle Initial) CHELE ST CLAIR Address 7 EVERGREEN DRIV			Date of Receipt
City	UNIT 47	State	Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87724
<u>CLIFT</u>	ON	NJ	07014	Amount of Each Receipt this Period
	number of contributing political committee.	C		25.00
Name of MEDC	of Employer O HEALTH SOLUTIONS	Occupatio DIR FOF	n RMULARY & COVERAGE MO	─ GMT
	t For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	me (Last, First, Middle Initial) DA STAFFORD	<b>I</b>		Date of Receipt
Mailing ———	Mailing Address 647 BERKELEY AVENUE			09 / 25 / Y Y Y Y Y
City		State	Zip Code	Transaction ID: INC.A.87874
<u>ORAN</u>	NGE	NJ	07050	Amount of Each Receipt this Period
	number of contributing political committee.	С		25.00
	of Employer O HEALTH SOLUTIONS	Occupatio ASST CO		
Receip		Aggregate	e Year-to-Date ▼	
	Primary		500.00	
	me (Last, First, Middle Initial) LPH STAIANO			Date of Receipt
Mailing ———	Address 1 LAMBROS DRIVE			09 / 25 / Y Y Y Y Y
City MONF	BOE	State NY	Zip Code 10950	Transaction ID: INC.A.87295  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C		25.00
Name of MEDC	of Employer O HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS REQUIREMENTS	S
	t For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 500.00	
	AL of Receipts This Page (optional)			75.00

SCHEDULE A	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 387 / 438 (check only one)    X   11a
or for commercial purp	oses, other than using the nam TTEE (In Full)	ne and add	not be sold or used by any persor ress of any political committee to ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions o solicit contributions from such committee.  1. Medco Health PAC)
Full Name (Last, Find PETER STARK Mailing Address 2)  City MEMPHIS  FEC ID number of a federal political communication Name of Employer ACCREDO HEALT  Receipt For: Primary Other (specify	contributing mittee.  TH GROUP		Zip Code 38117  NANCIAL OFFICER  Year-to-Date  1000.00	Date of Receipt  M M M / D D / 25 / 2010  Transaction ID: INC.A.87932  Amount of Each Receipt this Period  50.00
Full Name (Last, Find MR CHRISTOPHER Mailing Address 7)  City  WEST HARRISO  FEC ID number of dederal political com  Name of Employer MEDCO HEALTH  Receipt For:  Primary  Other (specify	TATEN TOREST LAKE DR  ON Contributing Imittee.  SOLUTIONS General		Zip Code 10604  ANCIAL & ANALYTICAL SV Year-to-Date  3846.20	Date of Receipt  M M M / D D / 25
Full Name (Last, Fire CHANNING STAVE Mailing Address Tuckahoe FEC ID number of federal political community MEDCO HEALTH Receipt For:    Primary Other (specify	contributing mittee.  SOLUTIONS  General		Zip Code 10707 MARKETING 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
SUBTOTAL of Recei	ots This Page (optional)			267.31

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one)   X   11a			
Any information copied from such Report for commercial purposes, other that	ports and Statements may n using the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTION	NS INC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)			
Full Name (Last, First, Middle Initia MS JILL STEARNS	d)		Date of Receipt			
Mailing Address 13130 HALSI	Mailing Address 13130 HALSELL DR					
City	State	Zip Code	Transaction ID: INC.A.87719			
AUSTIN FEC ID number of contributing federal political committee.	C	78732	Amount of Each Receipt this Period  50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n - ACCT EXEC				
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00				
Full Name (Last, First, Middle Initia MR CRAIG STEEL	<i>,</i>		Date of Receipt			
Mailing Address 122 DEMARE						
City EMERSON	State NJ	Zip Code 07630	Transaction ID: INC.A.87432  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	07000	50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n - ACCT EXEC				
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00				
Full Name (Last, First, Middle Initial MS AMY STEINKELLNER	l)		Date of Receipt			
Mailing Address 728 GULF BC C/O PO BOX			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City INDIAN ROCKS BEACH	State FL	Zip Code 33785	Transaction ID: INC.A.87487  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	33733	50.00			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP NATI	n ONAL PRACTICE LEADER				
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00				
SUBTOTAL of Receipts This Page (	optional)		150.00			
TOTAL This Period (last page this li	ne number only)					

ITEMIZED RE	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 389 / 438   (check only one)
or for commercial pu	rposes, other than using th	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMM MEDCO HEAL	, ,	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
MS LEAH STERM				Date of Receipt
Mailing Address	24 OAK PL			09 / 25 / 2010
City NORTH CALD	WELL	State NJ	Zip Code 07006	Transaction ID: INC.A.87502  Amount of Each Receipt this Period
FEC ID number of federal political co	of contributing	C	07000	25.00
Name of Employe MEDCO HEALT	er H SOLUTIONS	Occupatio TECHNI	n CAL SPECIALIST	
Receipt For: Primary Other (spec	General	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, DR GLEN STETT	First, Middle Initial) N			Date of Receipt
	8 MILL GLEN CT			09 25 2010
City UPPER SADD	I F RIVFR	State NJ	Zip Code 07458	Transaction ID: INC.A.87739  Amount of Each Receipt this Period
FEC ID number of federal political co	of contributing	C		192.31
Name of Employe MEDCO HEALT	er H SOLUTIONS	Occupatio SVP/GM	n ADVANCED CLINICAL SLT	TNS
Receipt For: Primary Other (spec	General	Aggregate	e Year-to-Date ▼ 3846.20	
Full Name (Last, MR GERARD STO	First, Middle Initial) OCKER, JR			Date of Receipt
	80 ALGONQUIN TRL	-		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OAKLAND		State NJ	Zip Code 07436	Transaction ID: INC.A.87433
FEC ID number of federal political co		C	0/436	Amount of Each Receipt this Period  50.00
Name of Employe MEDCO HEALT	er H SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
Receipt For: Primary Other (spec	General	Aggregate	e Year-to-Date ▼ 1000.00	
SUPTOTAL of Doc	ointe This Page (entional)	1		267.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one)   X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MS JANNA STOUL			Date of Receipt
Mailing Address 4 APACHE WAY			09 25 2010
City	State	Zip Code	Transaction ID: INC.A.87317
MONTVILLE  FEC ID number of contributing federal political committee.	NJ C	07045	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  MS SUZANNE STREDNAK			Date of Receipt
Mailing Address 157 WATCHUNG DR			09 25 7 2010
City HAWTHORNE	State NJ	Zip Code 07506	Transaction ID: INC.A.87376
FEC ID number of contributing federal political committee.	C	07300	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  MS PATRICIA STRETE			Date of Receipt
Mailing Address 19275 PAVER BARNI	ES ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MARYSVILLE	State OH	Zip Code 43040	Transaction ID: INC.A.87365
FEC ID number of contributing federal political committee.	C	43040	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n CLINICAL THERAPEUTICS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) .	1		100.00
Other (specify) ▼		500.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 391 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t	Statements may not be sold or used by any person he name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MILAYNA SUBAR, MD  Mailing Address 11 RIVERSIDE DRIV  #8CE  City  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 NY 10023  C  Occupation VP NATIONAL PRACTICE LEADER Aggregate Year-to-Date  600.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.87871  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) MRS WILARENE SUGGS Mailing Address 5111 FLUSS CV N  City BARTLETT  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code TN 38018  C  Occupation DIR SPECIALTY OPS CUST SVC Aggregate Year-to-Date  450.00	Date of Receipt  M M C D D C Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS COLEEN SULLIVAN Mailing Address 38 BARKMILL TERF  City MONTVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07045  C  Occupation SR DIR TECHNOLOGY Aggregate Year-to-Date  500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	80.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 392 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
_	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  MR MARK SULLIVAN  Mailing Address 16025 PINE VALE PL.			Date of Receipt
	City	State	Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87303
	MIDLOTHIAN	VA	23113	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation BUSINE	n SS PROCESS SPECIALIST	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- В.	Full Name (Last, First, Middle Initial) MR FREDERICK SUMNER			Date of Receipt
	Mailing Address 808 HOLLYWOOD AV			09 / 25 / 2010
	City	State	Zip Code	Transaction ID: INC.A.87385
	HO-HO-KUS  FEC ID number of contributing federal political committee.	NJ C	07423	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n PROJECT MGMT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) MS IRENE SUTTON			Date of Receipt
	Mailing Address 20 AVENUE @ PORT APT 209	IMPERIAL		0 9 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC.A.87395  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07095	40.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
	SUBTOTAL of Receipts This Page (optional)			115.00
	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(Check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and address of any political commit	
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT  Mailing Address 8362 GOLDEN PRAIF  City TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code FL 33647  C  Occupation VP/GM  Aggregate Year-to-Date ▼  1775.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MARK TANKERSLEY Mailing Address 1374 SAWMILL CREE  City CORDOVA  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code TN 38018  C  Occupation DIR MEDICAL INFORMATICS  Aggregate Year-to-Date  300.00	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) NICOLETTE TAPAY  Mailing Address 1338 KENYON ST. N.  City WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	W.  State Zip Code DC 20010  C  Occupation VP GOVERNMENT AFFAIRS  Aggregate Year-to-Date ▼  1200.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		115.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 394 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) MS JOANNE TAYLOR Mailing Address 39 ROCKAWAY PLAC  City	E State	Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	PARSIPPANY FEC ID number of contributing	NJ	07054	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		n CONTRACT ADMINISTRAT e Year-to-Date ▼	15.00 ION
_	Primary General Other (specify) ▼	0 0	300.00	
	Full Name (Last, First, Middle Initial) MR NICHOLAS TAYLOR Mailing Address 2847 NORTHWEST BI	_VD		Date of Receipt  0 9 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87747
	UPPER ARLINGTON FEC ID number of contributing federal political committee.	ОН	43221	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		NICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) AMI THAKKAR			Date of Receipt
	Mailing Address 1040 W ADAMS STRE UNIT 248	ET		09 25 2010
	City CHICAGO	State IL	Zip Code 60607	Transaction ID: INC.A.87764  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n CLINICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			65.00
Г	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 395 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR BOOBALAN THANGAVELU Mailing Address 13 BIRCH TERRACE			Date of Receipt
				09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87776
	MT ARLINGTON	NJ	07856	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	on CAL SPECIALIST	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
— В.	Full Name (Last, First, Middle Initial) MS MELINDA THIEL			Date of Receipt
	Mailing Address 27 GARVEY ROAD			09 / 25 / 2010
	City	State	Zip Code	Transaction ID: INC.A.87403
	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		PRODUCT MGMT	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	1
_	Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0	1
C.	MS MELISSA THOMET			Date of Receipt
	Mailing Address 721 HINMAN AVE #1E			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87311
	EVANSTON	<u>IL</u>	60202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ACCT MGMT OPS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify)		500.00	
Ţ,	SUBTOTAL of Receipts This Page (optional)			75.00
	FOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 396 / 438 (check only one)    X   11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any persong the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS MARY THORSBY  Mailing Address 17326 ELLEN DR  City LIVONIA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code MI 48152  C  Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date ▼	Date of Receipt    M M M
Other (specify) ▼  Full Name (Last, First, Middle Initial)  DREW THRAEN  Mailing Address 63 STILES AVE  City	State Zip Code	Date of Receipt  0 9 2 5 2 0 1 0  Transaction ID: INC.A.87836
MORRIS PLAINS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	NJ 07950  C  Occupation DIR OPS  Aggregate Year-to-Date ▼  500.00	Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN Mailing Address 838 COLONIAL RI City	O State Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
FRANKLIN LAKES  FEC ID number of contributing federal political committee.	NJ 07417	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation VP BENEFIT SYSTEMS SUPPORT  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (option	al)	150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 397 / 438 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS CHINNERETH TORRACA Mailing Address 95 ERNST AVENUE  City BLOOMFIELD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07003 n ENT REQUIREMENTS e Year-to-Date ▼  450.00	Date of Receipt  M M Z 5 Z 0 1 0  Transaction ID: INC.A.87336  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) SHERRY TOWNSEND Mailing Address 1327 FAIRWAY FORE  City CORDOVA  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State TN C Occupation DIR PHA	Zip Code 38016	Date of Receipt  M M M / D D / 2 5 / 2 0 1 0  Transaction ID: INC.A.87912  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR DAVID TRICE Mailing Address 150 BRADFORD DR.  City SCHWENKSVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	<del>-                                    </del>	Zip Code 19473 on CAL SPECIALIST e Year-to-Date ▼	Date of Receipt  M M M / D D / 2 5 2 0 1 0  Transaction ID: INC.A.87271  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number			75.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 398 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS CLAUDIA TUCKER  Mailing Address 713 INDIAN CREEK	( RD	Date of Receipt  0 9 2 5 2 0 1 0
City  AMHERST  FEC ID number of contributing	State Zip Code VA 24521	Transaction ID: INC.A.87568  Amount of Each Receipt this Period  120.00
Receipt For:  Primary  Other (specify) ▼	Occupation SR DIR GOVERNMENT AFFAIRS  Aggregate Year-to-Date  2100.00	]
Full Name (Last, First, Middle Initial) MR GARY TULLY Mailing Address 16 FIELDHEDGE D	RIVE	Date of Receipt  0 9 2 5 2 0 1 0
City HILLSBOROUGH FEC ID number of contributing federal political committee.	State Zip Code NJ 08844	Transaction ID: INC.A.87726  Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR CLIENT SVC DELIVERY  Aggregate Year-to-Date   600.00	
Full Name (Last, First, Middle Initial) MS DENISE TULP Mailing Address 273 STEVES LN		Date of Receipt  0 9 2 5 2 0 1 0
City FRANKLIN LAKES FEC ID number of contributing federal political committee.	State Zip Code NJ 07417	Transaction ID: INC.A.87519  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation VP SAFETY  Aggregate Year-to-Date ▼  1000.00	
Other (specify) ▼	1000.00	_

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 399 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ANN TURI  Mailing Address 764 COMANCHE LA  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupation ASST CO		Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.87887  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  MR JEFFREY TYLER  Mailing Address 37 KNOLL TERRACI  City  HAZLET  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 07730 n rECHNOLOGY e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: INC.A.87522  Amount of Each Receipt this Period  30.77
Full Name (Last, First, Middle Initial)  JEFF ULANET  Mailing Address 8803 BELMART RD  City  POTOMAC  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For:  Primary General  Other (specify)		Zip Code 20854 n DEV - ONCOLOGY 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
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		•	105.77

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 400 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
\ <b>\</b> .	Full Name (Last, First, Middle Initial)  MR KEITH URICH  Mailing Address 12495 SOUTH 1745 E/			Date of Receipt
	City DRAPER	State UT	Zip Code 84020	Transaction ID: INC.A.87491  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	C	n	25.00
	Receipt For: Primary General Other (specify)		IAL VP SALES-SYSTEMED  e Year-to-Date ▼  500.00	
3.	Full Name (Last, First, Middle Initial) MRS JENNIFER UTTERDYKE Mailing Address 1881 GREENTREE RC	)AD		Date of Receipt  0 9 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: INC.A.87409
	LEBANON FEC ID number of contributing federal political committee.	C	45036	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:		DICATION SAFETY/QUALITY	Y
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1200.00	
	Full Name (Last, First, Middle Initial) MS CARA VAN ZILE Mailing Address 31 LINCOLN RD			Date of Receipt  0 9 2 5 2 0 1 0
	City	State	Zip Code	0 9 2 5 2 0 1 0 Transaction ID: INC.A.87455
	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 EXEC D	n IR ANALYTICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			125.00
	TOTAL This Period (last page this line number of	anly)		

	LE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	. — —	
or for commer	on copied from such Reports and Strictal purposes, other than using the COMMITTEE (In Full) HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	solicit contribution	ns from such committee.
MRS MICH Mailing Ad  City  WAUKES  FEC ID nu federal poli	mber of contributing itical committee.	State WI	Zip Code 53189		eipt  2 5
Receipt Fo	ary General or (specify) ▼		n ENERAL MGR e Year-to-Date ▼ 3840.00		
MRS JEAN	(Last, First, Middle Initial) NINE VANKLEECK dress 56 ZIMMER AVENUE			Date of Rec	eipt
City		State	Zip Code	Transaction	ID: INC.A.87342
	D PARK  mber of contributing itical committee.	C	07432	Amount of E	each Receipt this Period
Name of E MEDCO H	mployer IEALTH SOLUTIONS	Occupatio DIR FINA	n ANCIAL APPLICATIONS		
Receipt Fo			e Year-to-Date ▼ 500.00		
	(Last, First, Middle Initial) ILAS VASILOPOULOS dress 105 ARRANDALE RD			Date of Rec	eipt
City	LLE OFNEDE	State	Zip Code		ID: INC.A.87561
FEC ID nu	LLE CENTRE mber of contributing itical committee.	C	11570	Amount of E	Each Receipt this Period 50.00
Name of E MEDCO F	mployer IEALTH SOLUTIONS	Occupatio VP MKTI		7	
Receipt Fo			e Year-to-Date ▼ 1000.00		
SUBTOTAL	of Receipts This Page (optional)		<b>)</b>		267.00
TOTAL This	Period (last page this line number of	only)			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 402 / 438 (check only one)    X   11a
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to b. POLITICAL ACTION COMMITTEE (a.k.:	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR WIL VELARDE Mailing Address 443 WEST SADDLE  City UPPER SADDLE RIVER	State Zip Code NJ 07458	Date of Receipt    M M
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR PRODUCT Aggregate Year-to-Date   600.00	30.00
Full Name (Last, First, Middle Initial) MR JEFFREY VERNICE Mailing Address 201 WATCHUNG A UNIT #17 City BLOOMFIELD FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	VENUE  State Zip Code NJ 07003  C  Occupation SR DIR COMPLIANCE Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / D D / 2 5
Full Name (Last, First, Middle Initial) MR GORDON VICKERS Mailing Address 436 MOUNTAIN AV  City WESTFIELD FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 07090  C  Occupation NATL ACCT EXEC Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / 2 5 2 0 1 0  Transaction ID: INC.A.87274  Amount of Each Receipt this Period  25.00
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional	0 0 0 0 0 0 0 0	80.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>K</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 403 / 438   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MUNISH VIJ			Date of Receipt
Mailing Address 11 BOULDER TRA	IL		09 25 2010
City MAHWAH	State <b>NJ</b>	Zip Code 07430	Transaction ID: INC.A.87778  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07400	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MR STEVEN VREELAND	<b>I</b>		Date of Receipt
Mailing Address 19 ANNA STREET			09 25 2010
City DENVILLE	State NJ	Zip Code 07834	Transaction ID: INC.A.87811
FEC ID number of contributing federal political committee.	C	07034	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	]
Full Name (Last, First, Middle Initial) MS ANNETTE WAGNER			Date of Receipt
Mailing Address 8 INDIAN RUN RO	AD		M M / D D / Y Y Y Y Y O D D / 25 2010
City LONG VALLEY	State NJ	Zip Code 07853	Transaction ID: INC.A.87615  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07033	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR 1	n FECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	<b>I</b>		75.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 404 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
(	Any information copied from such Reports and Stor for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR MICHAEL WAIBEL Mailing Address N48 W16381 LONE O/	AK I N		Date of Receipt
	Walling Address 1446 W 16381 LOINE O/	AK LIN		09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87488
	MENOMONEE FALLS	WI	53051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on ACCT MGMT OPS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
_ В.	Full Name (Last, First, Middle Initial) MR DANIEL WALDEN			Date of Receipt
	Mailing Address 450 BEECHMONT DR			09 25 2010
	City	State	Zip Code	Transaction ID: INC.A.87627
	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	!	GULATORY & MC PROGRA	MMS
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	0 0	3846.20	
с. С.	Full Name (Last, First, Middle Initial) MS THERESE WALKER			Date of Receipt
	Mailing Address 363 MULBERRY CT			09 25 Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.87292
	WYCKOFF	NJ	07481	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	on PRODUCT MGMT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
Γ	SUBTOTAL of Receipts This Page (optional)			232.31
	TOTAL This Period (last page this line number of			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 405 / 438 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	he name and add	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE Mailing Address 5445 GOODWIN AV  City DALLAS FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State TX C	Zip Code 75206	Date of Receipt  M M M / D D / 25 2010  Transaction ID: INC.A.87781  Amount of Each Receipt this Period  192.31
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 3846.20	
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Mailing Address 5 APPLE ORCHARD	) RD		Date of Receipt  0 9 2 5 2 0 1 0
City	State	Zip Code	Transaction ID: INC.A.87575
MOORESTOWN	NJ	08057	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	ı	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1950.00	
Full Name (Last, First, Middle Initial) LYNETTE WASHINGTON			Date of Receipt
Mailing Address 4272 MELWOOD O	AK DR		09 25 YYYYY
City	State	Zip Code	Transaction ID: INC.A.87913
LAKELAND  FEC ID number of contributing federal political committee.	C	38002	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR TRC	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			267.31

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 406 / 438 (check only one)  X 11a 11b 11c 12  13 14 15 16
or fo	information copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
\ \	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
<u>N</u>	Full Name (Last, First, Middle Initial) MS CATHERINE WASSON Mailing Address 3912 CALLE ANDALL	ICIA		Date of Receipt
_		JOI/ (		09 25 2010
	City SAN CLEMENTE	State CA	Zip Code 92673	Transaction ID: INC.A.87322  Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	С		50.00
<u>N</u>	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP NATI		
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
N	Full Name (Last, First, Middle Initial) MS BEVERLY WATSON			Date of Receipt
N	Mailing Address 2 MICHELANGELO C	COURT		09 25 2010
	Dity	State	Zip Code	Transaction ID: INC.A.87619
5	SOMERSET	NJ	08873	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		25.00
V	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR BEN	n IEFIT DELIVERY SYSTEMS	
F	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	]
	Full Name (Last, First, Middle Initial) MR SHERMAN WEAVER			Date of Receipt
N	Mailing Address 4940 BAYBERRY DR	IVE		09 25 YYYY 2010
	City	State	Zip Code	Transaction ID: INC.A.87825
	CUMMING	GA	30040	Amount of Each Receipt this Period
fe	FEC ID number of contributing ederal political committee.	C		26.00
_	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	DUR	
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 520.00	
	BTOTAL of Receipts This Page (optional) .			101.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 407 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS KELLY WEBBER Mailing Address 107 UPPER SADDLE I  City MONTVALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State NJ C Occupation VP COR	Zip Code 07645	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MARK WEGRYN Mailing Address 1717 DYMOKE DRIVE  City COLLIERVILLE  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General	State TN C Occupation AVP QA	Zip Code 38017  AND PRODUCT INTEGRAT  Year-to-Date   500.00	Date of Receipt  M M M
Full Name (Last, First, Middle Initial) LOWELL WEINER Mailing Address 1 BURGESS COURT  City WESTFIELD FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		Zip Code 07090	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number)	0 0	1000.00	175.00

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 408 / 438   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR TIMOTHY WENTWORTH			Date of Receipt
Mailing Address 309 WATERVIEW	DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City FRANKLIN LAKES	State <b>NJ</b>	Zip Code 07417	Transaction ID: INC.A.87418  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	n PRES EMPLOYER GROUP	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 3846.20	
Full Name (Last, First, Middle Initial) MR KENNETH WERMES	<b> </b>		Date of Receipt
Mailing Address 26037 N WRANGI	_ER RD		0 9 2 5 2 0 1 0
City SCOTTSDALE	State AZ	Zip Code 85255	Transaction ID: INC.A.87534
FEC ID number of contributing federal political committee.	C	00200	Amount of Each Receipt this Period  100.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1900.00	
Full Name (Last, First, Middle Initial) MR PETER WHITE			Date of Receipt
Mailing Address 2241 E. PINCHOT #17F	AVE.		M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O
City PHOENIX	State AZ	Zip Code 85016	Transaction ID: INC.A.87304  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03010	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	ACCT MGMT OPS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)		317.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 409 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MRS TAMARA WHITLEY		Date of Receipt
Mailing Address 5847 CLENDENIN A		09 25 2010
City <u>DALLAS</u>	State Zip Code TX 75228	Transaction ID: INC.A.87285  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR BUSINESS REQUIREMENTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) MR STEPHEN WILKINS, SR		Date of Receipt
Mailing Address 500 PARKER OAKS	LN	09 25 2010
City HUDSON OAKS	State Zip Code TX 76087	Transaction ID: INC.A.87630
FEC ID number of contributing federal political committee.	TX 76087	Amount of Each Receipt this Period  15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS PLANNING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 435.00	
Full Name (Last, First, Middle Initial) MR CHRISTOPHER WILSON		Date of Receipt
Mailing Address 2 TIFFANY ROAD		09 25 2010
City MORRISTOWN	State Zip Code NJ 07960	Transaction ID: INC.A.87500  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 07300	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
OUDTOTAL of Descripto This Descriptoral)		90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 410 / 438 (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS COLETTE WILSON  Mailing Address 16608 56TH PL W  City  LYNNWOOD  FEC ID number of contributing federal political committee.  Name of Employer  MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify)	State Zip Code WA 98037  C  Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date  500.00	Date of Receipt  M M M / D D / 25 2010  Transaction ID: INC.A.87426  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS BEVERLY WINKLER Mailing Address 17 LYNWOOD RD  City VERONA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07044  C  Occupation SR DIR ORG DEV  Aggregate Year-to-Date   500.00	Date of Receipt  M M M D D D D Y Y Y Y Y Y  Transaction ID: INC.A.87649  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) JAMES WINTRAUB Mailing Address 2166 BROADWAY A  City 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 NY 10024  C  Occupation DIR CREATIVE DEVELOPMENT  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / 25 2010  Transaction ID: INC.A.87846  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)		75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 411 / 438 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to so	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) MARY JANE WISEMAN Mailing Address 33 KNOLL ROAD  City WAYNE  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP  Receipt For: Primary General Other (specify)	State Zip Code NJ 07470  C  Occupation VP NURSING SVCS Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MR MICHAEL WISNIEWSKI  Mailing Address 23 DRUID HILL DR  City  PARSIPPANY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code NJ 07054  C  Occupation SR DIR CONTRACT ADMINISTRATIO Aggregate Year-to-Date   500.00	Date of Receipt  M M M / 25 / 2010  Transaction ID: INC.A.87718  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)  MR STEPHEN WOGEN  Mailing Address 145 WAUGHAW F  City  TOWACO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify)	State Zip Code NJ 07082  C  Occupation SVP FINANCIAL & ANALYTICAL SVC Aggregate Year-to-Date  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 9
SUBTOTAL of Receipts This Page (option	al) <b>&gt;</b>	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 412 / 438   (check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MRS ELISSA WOJTOWICZ, RPH  Mailing Address 43 AZALEA PLACE			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.87320
PISCATAWAY  FEC ID number of contributing federal political committee.	C	08854	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) MRS TARA WOLCKENHAUER Mailing Address 1730 DOGWOOD CR	EEK DRIVE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GERMANTOWN	State TN	Zip Code 38139	Transaction ID: INC.A.87515  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	Occupatio GROUP		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) MS CYNTHIA WOOD			Date of Receipt
Mailing Address 4002 FALCON LAKE I	DR		09 25 Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.87635
ARLINGTON  FEC ID number of contributing federal political committee.	C	76016	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRO	n DFESS PRACTICES POLICI	E\$
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)			105.00
TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 413 / 438   (check only one)     X
or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS JUDITH WOOD		Date of Receipt
Mailing Address 76 COLONIAL RO	AD	09 25 2010
City STILLWATER	State Zip Code NY 12170	Transaction ID: INC.A.87707  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 12170	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR ACCT MGMT OPS	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) BRENDA WRIGHT		Date of Receipt
Mailing Address 1834 HUNTERS C	REEK DRIVE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GERMANTOWN	State Zip Code TN 38138	Transaction ID: INC.A.87916  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP	Occupation DIR HEALTH OUTCOMES	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	1
Full Name (Last, First, Middle Initial)		1
MR SERGEY YANITSKIY  Mailing Address 793 LINCOLN AVE	<u> </u>	Date of Receipt  0 9 2 5 2 0 1 0
City	State Zip Code	Transaction ID: INC.A.87384
POMPTON LAKES  FEC ID number of contributing federal political committee.	NJ 07442	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (options	al)	75.00
	nber only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MS SARAH YINGLING			Date of Receipt
Mailing Address 901 ST MARKS AV	Έ		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.87516
WESTFIELD  FEC ID number of contributing federal political committee.	C	07090	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR M	IEDICARE OPS	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  MR DANIEL ZELEM, JR			Date of Receipt
Mailing Address 219 SPOOK ROCK	RD.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SUFFERN	State NY	Zip Code 10901	Transaction ID: INC.A.87606
FEC ID number of contributing federal political committee.	C	10301	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & Ch	HIEF INFO OFFICER	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	]
Full Name (Last, First, Middle Initial) MS JILL ZELMAN			Date of Receipt
Mailing Address 43604 EMERALD D	UNES PL		0 9 2 5 2 0 1 0
City LEESBURG	State VA	Zip Code 20176	Transaction ID: INC.A.87668
FEC ID number of contributing federal political committee.	C	20176	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR C	ONSOLIDATION PLAN	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l)		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 415 / 438 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ANATOLY ZHELEZNYAK Mailing Address 5 DENISE COURT			Date of Receipt  0 9 2 5 2 0 1 0
City  MANALAPAN  FEC ID number of contributing	State NJ	Zip Code 07726	Transaction ID: INC.A.87761  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  Other (specify) ▼	Occupation TECHNIC	n CAL SPECIALIST • Year-to-Date ▼ 500.00	1
Full Name (Last, First, Middle Initial)  MR JAMES ZIRPOLI  Mailing Address 6691 DEERVIEW D	DRIVE		Date of Receipt  0 9 2 5 2 0 1 0
City  LOVELAND  FEC ID number of contributing federal political committee.	State OH	Zip Code 45140	Transaction ID: INC.A.87484  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation VP/GM	n e Year-to-Date ▼ 975.00	1
Full Name (Last, First, Middle Initial) MR ANTHONY ZOLFO Mailing Address 726 HIGH MOUNTA	AIN BOAD		Date of Receipt
City FRANKLIN LAKES	State NJ	Zip Code 07417	0 9 2 5 2 0 1 0  Transaction ID: INC.A.87787  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		25.00
Receipt For:  Primary General  Other (specify) ▼	ASST CC Aggregate	o Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l)	·····	75.00

В.

PAGE 416 / 438 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) JOAN KENNEDY Date of Receipt Mailing Address 130 NORTH SEWALLS POINT ROAD 09 3 0 2010 City State Zip Code Transaction ID: INC.A.87265 **STUART** FI 34996 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 C federal political committee. Name of Employer LIBERTY MEDICAL Occupation **PRESIDENT** Receipt For: Aggregate Year-to-Date Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) JOHN PASTORE Date of Receipt Mailing Address 77 IVERS ROAD 0 9 30 2010 City State Zip Code Transaction ID: INC.A.87266 **ALLENDALE** NJ 07401 Amount of Each Receipt this Period FEC ID number of contributing C 650.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation DIRECTOR, ADVANCED CLINICAL SOLUTIONS Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00

SUBTOTAL of Receipts This Page (optional)	•	5650.00
TOTAL This Period (last page this line number only)	<b>•</b>	66454.00

Other (specify)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 417 / 438 (check only one)			
ITEMIZED RECEIPTS	EMIZED RECEIPTS		11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL /	ACTION COMMITTEE (a.k.a	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 Y Y Y Y Y Y Y			
City	State	Zip Code	Transaction ID: INC.A.87992			
CORTE MADERA	CA	94925	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		28.30			
Name of Employer	Occupatio	n	INTEREST EARNED			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 243.29				

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	28.30
TOTAL This Period (last page this line number only)	<b>•</b>	28.30

В.

### **SCHEDULE B (FEC Form 3X)**

President

District:

FOR LINE NUMBER: PAGE 418 / 438 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 29 30b 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) Transaction ID: EXP.B.86524 NIELSEN, MERKSAMER, PARRINELLO, MUELLER, & NAYLOR, LLP Date of Disbursement 16 0 9 2010 Mailing Address 1415 L STREET, STE. 1200 City State Zip Code Amount of Each Disbursement this Period **SACRAMENTO** 95814 CA 114.00 Purpose of Disbursement LEGAL & ACCOUNTING SERVICES 001 Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: EXP.B.86526 NIELSEN, MERKSAMER, PARRINELLO, MUELLER, & NAYLOR, LLP Date of Disbursement 16 0 9 2010 Mailing Address 1415 L STREET, STE. 1200 City State Zip Code Amount of Each Disbursement this Period SACRAMENTO 95814 CA 605.75 Purpose of Disbursement **LEGAL & ACCOUNTING SERVICES** 001 Candidate Name Category/ Туре Office Sought: House Disbursement For: Senate Primary General

SUBTOTAL of Disbursements This Page (optional)	•	719.75
TOTAL This Period (last page this line number only)	<u> </u>	719.75

Other (specify)

State:

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s	) FOR LINE (check only	NUMBER: PAGE 419 / 438
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29 3
Any Information copied from such Reports and Stator for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. PO			
Full Name (Last, First, Middle Initial) CHARLIE MELANCON CAMPAIGN COM	MMITTEE, INC.		Transaction ID: EXP.B.85820 Date of Disbursement
Mailing Address PO BOX 549			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City NAPOLEONVILLE	State Zip Code LA 70390		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name CHARLES MELANCON	0040	Category/ Type	
X Senate President	sement For: 2010 Primary X General Other (specify) ▼		
State: LA District: Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.85821
DAVID VITTER FOR US SENATE  Mailing Address PO BOX 8175			Date of Disbursement    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code		Amount of Each Disbursement this Period
METAIRIE  Purpose of Disbursement	LA 70011		5000.00
Candidate Name DAVID VITTER		011 Category/ Type	
	sement For: 2010 Primary X General Other (specify)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Full Name (Last, First, Middle Initial) LOBIONDO FOR CONGRESS			Transaction ID: EXP.B.85823 Date of Disbursement
Mailing Address P.O. BOX 775			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 0 & 3 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City MARMORA	State Zip Code NJ 08223		Amount of Each Disbursement this Period
Purpose of Disbursement		011	3000.00
Candidate Name FRANK A. LOBIONDO		Category/ Type	
Office Sought: X House Disbut	sement For: 2010 Primary X General	•	
President	Other (specify)		
State: NJ District: 02	Other (specify) ▼		9000.00

	ILE B (FEC Form 3	y Use sepa	arate schedule(s)	FOR LINE (check only	NUMBER: PAGE 420 / 438
ITEMIZE	D DISBURSEMENT		category of the ´ Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29 3
					or the purpose of soliciting contributions licit contributions from such committee
NAME OF	COMMITTEE (In Full) HEALTH SOLUTIONS IN				
	(Last, First, Middle Initial) EMOCRAT COALITION PA	AC			Transaction ID: EXP.B.85819 Date of Disbursement
Mailing Ad	ddress 607 14TH ST. N	W, STE. 800			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City WASHIN		State DC	Zip Code 2005		Amount of Each Disbursement this Period
Purpose o	f Disbursement			011 Category/	5000.00
	AL PURPOSE COMMITTE	Disbursement For:		Type	
State:	Senate President District:	Primary Other (spe	General ecify) ▼		
Full Name	(Last, First, Middle Initial) CAMPAIGN FUND				Transaction ID: EXP.B.86518 Date of Disbursement
Mailing Ad	ddress P.O. BOX 133				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & I & O \end{smallmatrix} \end{bmatrix} $
City WILMIN	GTON	State DE	Zip Code 19899		Amount of Each Disbursement this Period
	f Disbursement			011	4000.00
Candidate MICHAE	Name L N. CASTLE			Category/ Type	
Office Sou	X Senate President	Disbursement For:  X Primary Other (spe	2010 General		
	(Last, First, Middle Initial)				Transaction ID: EXP.B.86544
Mailing Ad	OF PEOPLE WHO SUPPO	PRT JEFF BINGAN	//AN		Date of Disbursement  O 9 1 6 2 0 1 0
City	JERQUE	State NM	Zip Code 87191		Amount of Each Disbursement this Period
MEDUCI	f Disbursement	IVIVI	0/ 131	011	2500.00
				7	
Purpose o	Name NGAMAN			Category/ Type	
Purpose o	NGAMAN  ught: House	Disbursement For:  X Primary Other (spe	2012 General		

ıT	CHEDULE B (FEC FOIII 3X)		arate schedule(s)	(check only	NUMBER: PAGE 421 / 438
	EMIZED DISBURSEMENTS	Detailed	category of the Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
	y Information copied from such Reports and Stror commercial purposes, other than using the report of COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and addre	ess of any politica	committee to so	licit contributions from such committee
_	Full Name (Last, First, Middle Initial) ADLER FOR CONGRESS			·	Transaction ID: EXP.B.86541 Date of Disbursement
	Mailing Address 14 KNIGHTSWOOD	DRIVE			09 16 7 2010
	City MARLTON	State NJ	Zip Code 08053		Amount of Each Disbursement this Perio
	Purpose of Disbursement  Candidate Name JOHN H. ADLER			011 Category/	1000.00
		ursement For: Primary Other (spe	2010  X General ecify)	Туре	
	Full Name (Last, First, Middle Initial) BERKLEY FOR CONGRESS				Transaction ID: EXP.B.86530 Date of Disbursement
	Mailing Address 3609 CONQUISTA C	Т.			09 16 7 2010
	City LAS VEGAS	State NV	Zip Code 89121		Amount of Each Disbursement this Perio
	Purpose of Disbursement			011	1500.00
	Candidate Name SHELLEY BERKLEY			Category/ Type	
	Office Sought:  X House Senate President State: NV District: 01	orsement For: Primary Other (spe	2010 X General ecify) ▼		
	Full Name (Last, First, Middle Initial) BLUMENAUER FOR CONGRESS				Transaction ID: EXP.B.86531 Date of Disbursement
	Mailing Address 830 NE HOLLADAY,	NO. 105			09 16 7 2010
	City PORTLAND	State OR	Zip Code 97232		Amount of Each Disbursement this Perio
					1000.00
	Purpose of Disbursement			011	
	Candidate Name EARL BLUMENAUER			O11 Category/ Type	
	Candidate Name EARL BLUMENAUER	ursement For: Primary Other (spe	2010  X General ecify)	Category/	

ITEMI		3 (FEC Form	Use se	eparate schedule(s)	1 -	NUMBER: PAGE 422 / 438
— 19111	ZED DIS	SBURSEMEN	TS for eac Detaile	ch category of the ced Summary Page	(check onl)	22 X 23 24 25 2 28a 28b 28c 29
						for the purpose of soliciting contributions plicit contributions from such committee
1 \		MITTEE (In Full) TH SOLUTIONS II	NC. POLITICAL A	ACTION COMMI	TTEE (a.k.a. N	Medco Health PAC)
	•	First, Middle Initial) CONGRESS				Transaction ID: EXP.B.86532 Date of Disbursement
Mailin	ng Address	PO BOX 390				0 9 M / D 1 6 / Y 2 0 1 0 Y
City Wate	erloo		State IA	Zip Code 50704		Amount of Each Disbursement this Period
	ose of Disbu	rsement			011	1500.00
BRU	lidate Name JCE BRALE				Category/ Type	
	e Sought:	X House Senate President	Disbursement For Primary Other (s			
State:		District: 01 First, Middle Initial)				Transaction ID: EXP.B.86534
	•	PRRIS RODGERS	FOR CONGRESS	S		Date of Disbursement
Mailin ——	ng Address	P.O. BOX 137				09 16 7 2010
City SPO	KANE		State WA	Zip Code 99210		Amount of Each Disbursement this Period
	ose of Disbu	rsement			011	1000.00
	didate Name HY MCMC	PRRIS RODGERS			Category/ Type	
Office	e Sought:	X House Senate President	Disbursement Form Primary Other (s			
	e: WA	District: 05		· 		
	Jame (Last I	First Middle Initial)				Towns attended EVD D 00000
Full N	, .	First, Middle Initial) GONZALEZ CONG	RESSIONAL CAI	MPAIGN		Transaction ID: EXP.B.86535 Date of Disbursement
Full N CHA	, .	. ,		MPAIGN		Date of Disbursement
Full N CHA Mailin City SAN	ARLES A. Cong Address	P.O. BOX 1261		MPAIGN  Zip Code 78212		Date of Disbursement  M 9 M / D 1 6 / Y Y Y O 1 0  Amount of Each Disbursement this Period
Full N CHA Mailin City SAN Purpo	ARLES A. Cong Address  I ANTONIC ose of Disbu	P.O. BOX 1261	2 State	Zip Code	011	Date of Disbursement  M 9 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full N CHA  Mailin  City SAN  Purpo	ARLES A. Cong Address  I ANTONIC ose of Disbuildidate Name ARLES A. Congression of the co	P.O. BOX 1261  Prement  GONZALEZ	State CA	Zip Code 78212	011 Category/ Type	Date of Disbursement  M 9 M / D 1 6 / Y Y Y O Y O Y  Amount of Each Disbursement this Period
Full N CHA  Mailin  City SAN  Purpo  Candi CHA  Office	ARLES A. Cong Address  I ANTONIC ose of Disbudidate Name ARLES A. Conght:	P.O. BOX 1261  P.O. BOX 1261  rsement  GONZALEZ  X House Senate President	State CA  Disbursement For Primary	Zip Code 78212	Category/	Date of Disbursement  M 9 M / D 1 6 / Y Y Y O Y O Y  Amount of Each Disbursement this Period
Full N CHA  Mailin  City SAN  Purpo	ARLES A. Cong Address  I ANTONIC ose of Disbudidate Name ARLES A. Conght:	P.O. BOX 1261  P.O. BOX 1261  rsement  GONZALEZ  X House Senate	State CA  Disbursement For Primary	Zip Code 78212	Category/	Date of Disbursement  M 9 M / D 1 6 / Y Y Y O Y O Y  Amount of Each Disbursement this Period

	CHEDULE B (FEC Form	y Use sepa	arate schedule(s)	FOR LINE (check only	
IT	EMIZED DISBURSEMEN	for each of Detailed S	category of the Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29
	y Information copied from such Reports for commercial purposes, other than us				for the purpose of soliciting contributions licit contributions from such committee
$\rangle$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS	INC. POLITICAL AC	TION COMMI	TTEE (a.k.a. N	Medco Health PAC)
	Full Name (Last, First, Middle Initial) DENNY HECK FOR CONGRES	S			Transaction ID: EXP.B.86545 Date of Disbursement
	Mailing Address PO BOX235				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City OLYMPIA	State WA	Zip Code 98507		Amount of Each Disbursement this Peri
	Purpose of Disbursement  Candidate Name			011	3000.00
	DENNIS HECK	I Dishara was 5	2010	Category/ Type	
	Office Sought: X House Senate President	Disbursement For: Primary Other (spe	2010 X General ecify) ▼		
	State: WA District: 03  Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER				Transaction ID: EXP.B.86536 Date of Disbursement
	Mailing Address 509 MADISON	I AVE., STE. 1902			$\begin{bmatrix}\begin{smallmatrix}M\\O\end{smallmatrix}O\end{smallmatrix}^M & \begin{smallmatrix}D\\D\end{smallmatrix}1\overset{D}6 & \begin{smallmatrix}Y\\O\end{smallmatrix}2 \ 0 \ 1 \ 0 \\ \end{smallmatrix}$
	City NEW YORK	State NY	Zip Code 10022		Amount of Each Disbursement this Peri
	Purpose of Disbursement			011	3000.00
	Candidate Name CHARLES SCHUMER			Category/ Type	
	Office Sought:  House  X Senate  President	Disbursement For: Primary Other (spe	2010 X General		
	State: NY District: Full Name (Last, First, Middle Initial)				Transaction ID: EXP.B.86537
	GRASSLEY COMMITTEE INC.				Date of Disbursement  M 9 M / D 1 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address P.O. BOX 100		7:- O-d-		
	City DES MOINES	State IA	Zip Code 50304		Amount of Each Disbursement this Peri
	Purpose of Disbursement  Candidate Name CHARLES E. GRASSIEV			011 Category/	
	Office Sought:  House  X Senate  President	Disbursement For: Primary Other (spe	2010 X General ecify) ▼	Туре	
	State: IA District:		-, •		

CHEDULE B (FEC FOIII 3X)	Use separate schedule(	s) (check only	NUMBER: PAGE 424 / 438
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
ny Information copied from such Reports and Start for commercial purposes, other than using the remarks OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. PO	OLITICAL ACTION COMM	IITTEE (a.k.a. N	Medco Health PAC)
Full Name (Last, First, Middle Initial) HIGGINS FOR CONGRESS			Transaction ID: EXP.B.86533 Date of Disbursement
Mailing Address PO BOX 28			09 16 7 2010
City BUFFALO	State Zip Code NY 14220		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	1000.00
Candidate Name BRIAN HIGGINS		Category/ Type	
Senate President	rsement For: 2010 Primary X Genera Other (specify) ▼	ı	
State: NY District: 27  Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.87264
HOLDING ONTO OREGON'S PRIORIT	TIES		Date of Disbursement
Mailing Address P.O. BOX 3314			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 6 \\ 0 & 1 & 6 \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 0 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & 1 \end{bmatrix}$
City PORTLAND	State Zip Code OR 97208		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	5000.00
Candidate Name GENERAL PURPOSE COMMITTEE		Category/ Type	
Senate President	orsement For:  Primary Genera  Other (specify) ▼	ı	
State: District:  Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.86546
MIKULSKI FOR SENATE COMMITTEE			Date of Disbursement
Mailing Address P.O. BOX 13147			
City BALTIMORE	State Zip Code MD 21203		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	3000.00
Candidate Name BARBARA MIKULSKI		Category/ Type	
X Senate President	ursement For: 2010 Primary X Genera Other (specify) ▼	1	
State: MD District:			

ITI	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE	
	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only	7 one)  22
	Information copied from such Reports and Sor commercial purposes, other than using the				
$\setminus$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F				
	Full Name (Last, First, Middle Initial) MORAN FOR KANSAS				Transaction ID: EXP.B.86539 Date of Disbursement
	Mailing Address PO BOX 1151				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	City HAYS	State KS	Zip Code 67601		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	2000.00
	Candidate Name JERRY MORAN			Category/ Type	
	X Senate President	bursement For: Primary Other (spe	2010 X General ecify) ▼		
	State: KS District: Full Name (Last, First, Middle Initial) NORM DICKS FOR CONGRESS				Transaction ID: EXP.B.86543 Date of Disbursement
	Mailing Address PO BOX 1663				0 9 1 6 7 2 0 1 0 Y
	City TACOMA	State WA	Zip Code 98401		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	2500.00
	Candidate Name NORMAN DICKS			Category/ Type	
	INOT IIVIAIN DIONO				
		oursement For: Primary Other (spe	2010 X General ecify) ▼		
	Office Sought:  X House Senate President State: WA District: 06  Full Name (Last, First, Middle Initial)	Primary	X General		Transaction ID: EXP.B.86542
	Office Sought:  X House Senate President State: WA District: 06  Full Name (Last, First, Middle Initial) STIVERS FOR CONGRESS	Primary Other (spe	X General		Transaction ID: EXP.B.86542 Date of Disbursement
	Office Sought:  X House Senate President State: WA District: 06  Full Name (Last, First, Middle Initial) STIVERS FOR CONGRESS  Mailing Address 4679 WINTERSET I	Primary Other (spe	X General ecify) ▼		Date of Disbursement  M 9 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Office Sought:  X House Senate President State: WA District: 06  Full Name (Last, First, Middle Initial) STIVERS FOR CONGRESS  Mailing Address 4679 WINTERSET I	Primary Other (spe	X General		Date of Disbursement  M 9 M / D 1 6 / Y Y Y O Y O Y  Amount of Each Disbursement this Period
	Office Sought:  X House Senate President State: WA District: 06  Full Name (Last, First, Middle Initial) STIVERS FOR CONGRESS  Mailing Address 4679 WINTERSET I  City COLUMBUS Purpose of Disbursement  Candidate Name	Primary Other (spe	X General ecify) ▼  Zip Code	011 Category/	Date of Disbursement  M 9 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Office Sought:  X House Senate President State: WA District: 06  Full Name (Last, First, Middle Initial) STIVERS FOR CONGRESS  Mailing Address 4679 WINTERSET [ City COLUMBUS Purpose of Disbursement  Candidate Name STEVE STIVERS	ORIVE  State OH	X General ecify) ▼  Zip Code 43220	011 Category/ Type	Date of Disbursement  M 9 M / D 1 6 / Y Y Y O Y O Y  Amount of Each Disbursement this Period
	Office Sought:  X House Senate President State: WA District: 06  Full Name (Last, First, Middle Initial) STIVERS FOR CONGRESS  Mailing Address 4679 WINTERSET [ City COLUMBUS Purpose of Disbursement  Candidate Name STEVE STIVERS	Primary Other (spe	X General ecify) ▼  Zip Code 43220  2010  X General	Category/	Date of Disbursement  M 9 M / D 1 6 / Y Y Y O 1 0 Y  Amount of Each Disbursement this Period

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/		TV OOMMITTE	L (a.n.a. 1	vicaco i ic				
Full Name (Last, First, Middle Initia WIN BACK AMERICA POLIT	ICAL ACTION COMMITTE	E			tion ID: E Disburseme	nt	540 0 1 0	Y
Mailing Address PO BOX 11	31							
City ANDERSON		Code 6015		Amount	of Each Dis	bursemen	t this P	erioc
Purpose of Disbursement						25	00.00	
Candidate Name LEADERSHIP PAC		Ca	011 ategory/ Type					
Office Sought: House Senate President	Disbursement For: Primary Other (specify)	General						
State: District: Full Name (Last, First, Middle Initia	<u> </u> 			T	tion ID. F	. VD D 00	F00	
WYDEN FOR SENATE	.,				t <b>ion ID:</b> E Disburseme		529	
Mailing Address 232 NE 9Th	I AVE.			0 9	<sup>/</sup> 16	/ Y 2	0 Ĭ 0	Y
City PORTLAND		Code 7232		Amount	of Each Dis			erio
Purpose of Disbursement			011			50	00.00	
Candidate Name RONALD LEE WYDEN		Ca	ategory/ Type					
Office Sought:  House X Senate President	Disbursement For: Primary Other (specify)	2010 X General						
State: OR District: Full Name (Last, First, Middle Initial CONYERS FOR CONGRESS	• /				t <b>ion ID:</b> E		236	
Mailing Address 1831 BAY S	STREET SE			0 9	<sup>/</sup> 23	/ Y 2	010	Y
City WASHINGTON		Code 0003		Amount	of Each Dis	bursemen	t this P	erio
Purpose of Disbursement			011			10	00.00	
Candidate Name JOHN CONYERS, JR.			ategory/ Type					
Office Sought:  X House Senate President	Disbursement For: Primary Other (specify)	2010 X General						
State: MI District: 14								
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SCHEDULE B (FEC Fo TEMIZED DISBURSEM	IENTS for	e separate schedule( each category of the	(check onli	y one)
		ailed Summary Page	27	22 X 23 24 25 28a 28b 28c 29
				for the purpose of soliciting contributions plicit contributions from such committee
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIO	NS INC. POLITICA	L ACTION COMM	ЛІТТЕЕ (a.k.a. N	Medco Health PAC)
Full Name (Last, First, Middle Initi	,			Transaction ID: EXP.B.87237 Date of Disbursement
Mailing Address PO BOX 2	33			09 7 23 7 2010
City NASHUA	State NH	Zip Code 03061		Amount of Each Disbursement this Per
Purpose of Disbursement			011	5000.00
Candidate Name KELLY AYOTTE			Category/ Type	
Office Sought:  House  X Senate  President	Disbursement I Prima Othe		ıl	
State: NH District:		· • •		
Full Name (Last, First, Middle Initi GARDNER FOR CONGRES	•			Transaction ID: EXP.B.87242 Date of Disbursement
Mailing Address PO BOX 2	408			09 / 23 / 4 2010
City LOVELAND	State CO	Zip Code 80539		Amount of Each Disbursement this Per
Purpose of Disbursement			011	1000.00
Candidate Name CORY SCOTT GARDNER			Category/ Type	
Office Sought: X House Senate President	Disbursement I		ıl	
State: CO District: 04  Full Name (Last, First, Middle Initi	al)			Transaction ID: EVD D 07000
IKE SKELTON FOR CONGR	•			Transaction ID: EXP.B.87238  Date of Disbursement
Mailing Address P.O. BOX	A			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City HARRISONVILLE	State MO	Zip Code 64701		Amount of Each Disbursement this Per
Purpose of Disbursement			011	5000.00
Candidate Name IKE SKELTON			Category/ Type	
Office Sought: X House Senate President	Disbursement I		1	
State: MO District: 04		(Spoon)) <b>\</b>		

	CHEDULE B (FEC FOIII)	y Use sepa	arate schedule(s)		ck only	NUMBER	•	L P	AGE 42	28 / 438
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	y Information copied from such Reports for commercial purposes, other than usin NAME OF COMMITTEE (In Full)									
<i>/</i>	MEDCO HEALTH SOLUTIONS II	NC. POLITICAL AC	CTION COMMI	TTEE (a	.k.a. M	1edco He	alth PA	C)		
	Full Name (Last, First, Middle Initial)  MAJORITY COMMITTEE PAC - I	MC PAC					ction ID: Disburse			
	Mailing Address P.O. BOX 1013	34				0.9	2	3	20	10
	City BAKERSFIELD	State CA	Zip Code 93389			Amount	of Each	Disburs	ement th	is Perio
	Purpose of Disbursement			011					2000	.00
	Candidate Name LEADERSHIP PAC			Catego Type	ry/					
	Office Sought: House Senate President	Disbursement For: Primary Other (spe	2010 X General ecify) ▼							
	State: District: Full Name (Last, First, Middle Initial)					Transa	ction ID:	EXP.	B.8723	9
	MATSUI FOR CONGRESS					Date of	Disburse / D		Y Y	Y Y
	Mailing Address P.O. BOX 1738					0 9	2	<sup>D</sup> /	20	1 0 °
	City SACRAMENTO	State CA	Zip Code 95812			Amount	of Each	Disburs	ement th	is Perio
	Purpose of Disbursement			011					5000	.00
	Candidate Name DORIS MATSUI			Catego	ry/					
	Office Sought:  X House Senate President	Disbursement For: Primary Other (spe	2010 X General							
	State: CA District: 05 Full Name (Last, First, Middle Initial)					Transa	ction ID:	FXP	B 8724	0
	NEW PIONEERS PAC					Date of	Disburse	ement		
	Mailing Address 228 SOUTH W	ASHINTGON STRE	EET, SUITE			0 9	<sup>/</sup> <sup>D</sup> 2	3	Ý Ž O	10
	City ALEXANDRIA	State VA	Zip Code 22314			Amount	of Each	Disburs	ement th	is Perio
	Purpose of Disbursement			011		L.			2000	.00
	Candidate Name LEADERSHIP PAC			Catego Type	ry/					
	Office Sought: House Senate President	Disbursement For: Primary Other (spe	General ecify) ▼							
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29				
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NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PC	··						
Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS  Mailing Address PO BOX 3176			Transaction ID: EXP.B.87235 Date of Disbursement  0 9 2 3 7 2 0 1 0				
City	State Zip Code		Amount of Fools Dishurs amount this Deviced				
LONG BRANCH	NJ 07740		Amount of Each Disbursement this Period				
Purpose of Disbursement		011	2500.00				
Candidate Name FRANK PALLONE, JR		Category/ Type					
Office Sought:  X House Senate President State: NJ District: 06	rsement For: 2010 Primary X General Other (specify) ▼						
Full Name (Last, First, Middle Initial) SENATE MAJORITY FUND			Transaction ID: EXP.B.87241 Date of Disbursement				
Mailing Address P.O. BOX 32025			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} & \begin{smallmatrix} M \\ \end{smallmatrix} & \begin{bmatrix} D \\ D$				
City PHOENIX	State Zip Code AZ 85064		Amount of Each Disbursement this Perioc				
Purpose of Disbursement		011	5000.00				
Candidate Name LEADERSHIP PAC		Category/ Type					
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)	1 "					
Full Name (Last, First, Middle Initial) HOEVEN FOR SENATE			Transaction ID: EXP.B.87246 Date of Disbursement				
Mailing Address PO BOX 15114			09 / 28 / 2010				
City ARLINGTON	State Zip Code VA 22215		Amount of Each Disbursement this Period				
Purpose of Disbursement		011	5000.00				
Candidate Name JOHN HOEVEN		Category/ Type					
X Senate President	sement For: 2010 Primary X General Other (specify) ▼						
State: ND District:							
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	y Information copied from such Reports and State for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. PO	ne and address of any politic	al com	nmitt	tee to sol	icit contr	ibuti	ons f	rom s				
	Full Name (Last, First, Middle Initial) KRISTI FOR CONGRESS  Mailing Address PO BOX 852					Trans Date		sburs	_			245 0 1 0	Y
	City SIOUX FALLS Purpose of Disbursement	State Zip Code SD 57101				Amou	int of	f Eacl	h Dis	burse	-	t this F	-
	Candidate Name KRISTI LYNN NOEM			01 ateg Typ	ory/			•			•		
	Office Sought:  X House Senate President State: SD District:	sement For: 2010 Primary X General Other (specify) ▼	1										
	Full Name (Last, First, Middle Initial) TARGET STATE VICTORY FUND Mailing Address 228 SOUTH WASHING	TON STREET, SUITE				Trans Date		sburs				244 0 1 0	Y
	City ALEXANDRIA Purpose of Disbursement	State Zip Code VA 22314	T	0.1	4	Amou	int o	f Eacl	h Dis	burse		t this F	
	Candidate Name JOINT FUNDRAISING COMMITTEE			01 ateg Typ	ory/								
	Office Sought: House Senate President State: District:	sement For: Primary General Other (specify) ▼											
	Full Name (Last, First, Middle Initial) ALAMO PAC					Trans Date	of Di	sburs	seme				
	Mailing Address 919 CONGRESS AVEN	IUE, SUITE 1400, F				0 <sub>M</sub> 9	M	/ D:	29		ž	0 Ť 0	Y
	City AUSTIN	State Zip Code TX 78701				Amou	int o	f Eacl	h Dis	burse		t this F	
	Purpose of Disbursement  Candidate Name LEADERSHIP PAC			01 ateg Typ	ory/				•		40	00.00	
	Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify)	1										
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SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	) FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
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NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	LITICAL ACTION COMMI	TTEE (a.k.a. M	Medco Health PAC)
Full Name (Last, First, Middle Initial) BLUEGRASS COMMITTEE			Transaction ID: EXP.B.87249 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 400 N. CAPITOL STRE	EET, NW, SUITE 5		09 29 2010
City WASHINGTON	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement		011	5000.00
Candidate Name LEADERSHIP PAC		Category/ Type	
Office Sought: House Disbut Senate President State: District:	rsement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) CONTINUING A MAJORITY PARTY AC	TION COMMITTEE (CAM	PAC)	Transaction ID: EXP.B.87258 Date of Disbursement
Mailing Address 5915 EASTMAN AVEN		,	$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City MIDLAND	State Zip Code MI 48640		Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name		011 Category/	1500.00
LEADERSHIP PAC		Type	
Office Sought: House Disbut Senate President State: District:	resement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) FORWARD TOGETHER PAC			Transaction ID: EXP.B.87250 Date of Disbursement
Mailing Address 201 NORTH UNION S	TREET, SUITE 300		$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City ALEXANDRIA	State Zip Code VA 22314		Amount of Each Disbursement this Period
Purpose of Disbursement		011	5000.00
Candidate Name LEADERSHIP PAC		Category/ Type	
Senate President	rsement For: Primary General Other (specify)		
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TOTAL This Period (last page this line number on	ly)	<b>&gt;</b>	

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ANAME OF COMMITTEE (in Full)  NAME OF COMMITTEE (in Full)  MEDICO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial) FREEDOM FUND  Malling Address 701 8TH STREET, NW, SUITE 500  City WASHINGTON DC 20001  Purpose of Disbursement  Office Sought: Full Name (Last, First, Middle Initial) FRIENDS OF MIKE LEE INC.  Malling Address 190 WEST 800 NORTH STE 100  City State Zip Code Primary Address 190 WEST 800 NORTH STE 100  City Proces of Disbursement  Office Sought: Senate President State: UT District:  Full Name (Last, First, Middle Initial) FRIENDS OF MIKE LEE INC.  Malling Address 190 WEST 800 NORTH STE 100  City Proces of Disbursement  Office Sought: Senate Primary X General Other (specify) ▼  Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Office Sought: Senate Disbursement  Other (specify) ▼  Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Other (specify) ▼  Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Office Sought: Full Name (Last, First, Middle Initial) HELPING encounter Each Disbursement Tips Page City State: UT District:  Full Name (Last, First, Middle Initial) HELPING encounter Each Disbursement Tips Page City State:  Other (specify) ▼  Transaction ID: EXP.B.87252 Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement Tips Page Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Transaction ID: EXP.B.87252 Date of Disbursement Tips Page Transaction ID: EXP.B.87262 Date of Disbursement Tips Page Transaction ID: EXP.B.87252 Da	ITEMIZED DISBURSEMENTS		21b 27	22 X 23 24 25 28a 28b 28c 29
Transaction ID: EXP.B.87262 Disbursement  Candidate Name LEADERSHIP PAC  City WASHINGTON District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) President State: UT District:  Full Name (Last, First, Middle Initial) City WILLOWS CA 95988  Purpose of Disbursement Candidate Name LEADERSHIP PAC  Office Sought: House Senate President State: Disbursement For: Senate President Other (specify) ▼  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)  Interval Disbursement This Page (optional)	or for commercial purposes, other than using th  NAME OF COMMITTEE (In Full)	e name and address of any politica	l committee to soli	cit contributions from such committee
WASHINGTON Purpose of Disbursement Candidate Name LEADERSHIP PAC  Office Sought:	FREEDOM FUND	NW, SUITE 500		Date of Disbursement
Candidate Name LEADERSHIP PAC  Office Sought:				Amount of Each Disbursement this Period
Cardidate Name LEADERSHIP PAC  Office Sought:	Purpose of Disbursement		011	5000.00
Office Sought:			Category/	
FRIENDS OF MIKE LEE INC.  Mailing Address 190 WEST 800 NORTH STE 100  City State Zip Code UT 84601  Purpose of Disbursement  Candidate Name MIKE LEE  Office Sought: House President Primary X General Primary X General Class (HERGER) PAC  LICANS (HERGER) PAC  City State Zip Code Primary X General Class (PAC) PAC  Mailing Address P.O. BOX 984  City State Zip Code CA 95988  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House State Primary X General Class (PAC) PAC  Office Sought: House CA 95988  Disbursement For: Senate Primary General Category/ Type  Office Sought: House Disbursement For: Senate Primary General Category/ Type  Office Sought: House Disbursement For: Senate Primary General Category/ Type  State: District: District: Type  Substortal of Disbursement For: Senate Primary General Category/ Type  Disbursement For: Senate Primary General Category/ Type  State: District: District: Type Other (specify) Type  Substortal of Disbursements This Page (optional)	Senate President	Primary General		
City PROVO  Purpose of Disbursement  Candidate Name MIKE LEE  Office Sought:	•			Date of Disbursement
PROVO Purpose of Disbursement  Candidate Name MIKE LEE  Office Sought: House Primary General Disbursement For: 2010 State: UT District:  Full Name (Last, First, Middle Initial) HELPING ENSURE RESPONSIBLE GOVERNMENT BY ELECTING REPUB- LICANS (HERGER) PAC  Mailing Address P.O. BOX 984  City State Zip Code WILLOWS CA 95988  Purpose of Disbursement Candidate Name LEADERSHIP PAC  Office Sought: House Primary General Other (specify) ▼  State: UT District:  Transaction ID: EXP.B.87252 Date of Disbursement  Mailing Address P.O. BOX 984  Amount of Each Disbursement this Per  Category/ Type  Transaction ID: EXP.B.87252 Date of Disbursement  Mailing Address P.O. BOX 984  Amount of Each Disbursement this Per  Category/ Type  Type  State: District:  SUBTOTAL of Disbursements This Page (optional) ■  15000.00	Mailing Address 190 WEST 800 NO	RTH STE 100		09 29 2010
Candidate Name MIKE LEE  Office Sought: House				Amount of Each Disbursement this Perio
Office Sought:  House	Candidate Name		Category/	5000.00
Full Name (Last, First, Middle Initial) HELPING ENSURE RESPONSIBLE GOVERNMENT BY ELECTING REPUBLICANS (HERGER) PAC  Mailing Address P.O. BOX 984  City WILLOWS CA 95988  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House President State: District:  Transaction ID: EXP.B.87252 Date of Disbursement  0 9 9 /	Office Sought:    House   Di    X   Senate     President	Primary X General	Туре	
Mailing Address P.O. BOX 984  City State Zip Code WILLOWS CA 95988  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Senate Primary General President Other (specify) ▼  Substotal of Disbursements This Page (optional)	Full Name (Last, First, Middle Initial) HELPING ENSURE RESPONSIBLE	GOVERNMENT BY ELECTIN	IG REPUB-	
WILLOWS Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Senate President President State: District:  SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)  SUBTOTAL of Disbursements This Page (optional)  1011 Category/ Type  Category/ Type  Category/ Type  Category/ Type  Total This Period (last page this line number only)	,			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ O & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & 2 & 0 & 1 & 0 \end{bmatrix}$
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Candidate Name LEADERSHIP PAC  Office Sought: House Senate Primary President State: District:  SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Total This Period (last page this line number only)	Purpose of Disbursement		011	5000.00
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	CHEDULE B (FEC Form 3X)	Use separate so			_	R LINE	NUMB	ER:				PAC	ŝΕ	433 /	438
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	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLI														
	Full Name (Last, First, Middle Initial) MAJORITY COMMITTEE PAC - MC PAC						_		-		EXI ment	P.B.	872	259	
	Mailing Address P.O. BOX 10134						0,8	) M	/	<sup>D</sup> 2	9 /	Y	ž	0 Ĭ 0	Y
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	Senate President	Primary Other (specify)	General												
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	Mailing Address PO BOX 3241						0 8	М		<sup>D</sup> 2		Y	ž	0 1 0	Y
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	Mailing Address PO BOX 1948						0,8	) M	/	<sup>D</sup> 2	9 /	Y	ž	0 1 0	Y
	City BOISE	State Zip CID 837					Amo	unt c	of Ea	ach	Disbu			this P	
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	Candidate Name MICHAEL D. CRAPO			Cate Ty	ego ype	-									
	X Senate President		2010 General												
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SCHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)		FOR LI		-	R:			PA	GE	434 /	438
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NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI													
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,	State WA	Zip Code 98101				Amou	nt of	Each	n Disk	ourse	-		-
Purpose of Disbursement				011		L.	-	•			50	00.00	
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State: District:  Full Name (Last, First, Middle Initial)						Trans					3.87	254	
NEW MILLENNIUM PAC						Date	of Di		emer 2 9	nt / Y	Ý	0 <del>1</del> 0	Y
Mailing Address ONE GATEWAY CENTE	R, SUITE	520				0 9				L		010	
7	State NJ	Zip Code 07102				Amou	nt of	Each	n Disk	ourse	men	t this F	Period
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Mailing Address 228 SOUTH WASHINTG	ON STRE	ET, SUITE				0 <sup>M</sup> 9	М	D	29	/ Y	ž	0 1 C	Y
	State VA	Zip Code 22314				Amou	nt of	Each	n Disk	ourse	-		-
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TEMIZED DISBURSEMENTS    for each category of the		CHEDULE B (FEC FOIII 3X)	Use		e schedule(s)				NUMBE	R:		L P	AGE	435 /	438
Transaction ID: EXP.B.87255 Date of Disbursement Total Candidate Name LEADERSHIP PAC  Office Sought: House President President State: Disbursement For: Cardidate Name LEADERSHIP PAC  Office Sought: House President Primary General Primary General Primary General Primary General Primary General Primary General Primary General Primary General Primary General Primary General Primary General Disbursement Tiber Office Sought: House Senate President State: Disbursement Disbursement Disbursement Tiber Office Sought: Amount of Each Disbursement Tiber Office Sought: House Senate President State: Disbursement Tiber Office Sought: Amount of Each Disbursement Tiber Office Sough			Deta	iled Sur	nmary Page		Ė	21b 27	22 28a		28b	28c		29	
ORRINPAC  Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650  City SALT LAKE CITY State Zip Code SALT LAKE CITY B4101  Candidate Name LEADERSHIP PAC  Office Sought: House President State Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial) TibER I PAC  Office Sought: House Disbursement For: Senate Primary General Primary General Primary General Primary General Primary General Primary General Primary General Primary General Primary General Primary General Primary General Other (specify) ▼  Transaction ID: EXP.B.87247 Date of Disbursement this Peri General Other (specify) ▼  Transaction ID: EXP.B.87247 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87247 Date of Disbursement this Peri General Other (specify) ▼  Transaction ID: EXP.B.87247 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87247 Date of Disbursement this Peri General Other (specify) ▼  Transaction ID: EXP.B.87247 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87247 Date of Disbursement this Peri General Other (specify) ▼  Transaction ID: EXP.B.87247 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87247 Date of Disbursement this Peri General Other (specify) ▼  Transaction ID: EXP.B.87261 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87261 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87261 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87261 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87261 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87261 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87261 Date of Disbursement Tible Primary General Other (specify) ▼  Transaction ID: EXP.B.87247 Date of Disbursement Tible Primary General Other (specify) ▼  Tra		for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and a	ddress o	of any political	con	nmit	tee to so	licit conti	ributio	ns fro	m such			
SALT LAKE CITY Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) PROSPERITY PAC  Mailing Address 1006 PENDLETON ST.  City ALEXANDRIA Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House President State: Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: EXP.B.87247  Date of Disbursement this Period (ast Primary General Other (specify) ▼  Transaction ID: EXP.B.87247  Date of Disbursement this Period (ast Primary General Other (specify) ▼  Transaction ID: EXP.B.87247  Date of Disbursement this Period (ast Primary General Other (specify) ▼  Transaction ID: EXP.B.87247  Date of Disbursement this Period (ast Primary General Other (specify) ▼  Transaction ID: EXP.B.87261  Date of Disbursement this Period (ast Primary General Other (specify) ▼  Transaction ID: EXP.B.87261  Date of Disbursement this Period (ast Primary General Other (specify) ▼  Transaction ID: EXP.B.87261  Date of Disbursement this Period (ast Primary General Other (specify) ▼  Transaction ID: EXP.B.87261  Date of Disbursement this Period (ast Primary General Other (specify) ▼  Total This Period (last page this line number only) ■  TOTAL This Period (last page this line number only) ■	<u>/</u>	ORRINPAC	TEMPLE, \$	SUITE	650				Date	of Dis	burse	ment	_		Y
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Office Sought:		Candidate Name					ateg	jory/	L.				500	00.00	
PROSPERITY PAC  Mailing Address 1006 PENDLETON ST.  City ALEXANDRIA Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: Full Name (Last, First, Middle Initial) TIBERI FOR CONGRESS  Mailing Address 2931 EAST DUBLIN GRANVILLE ROAD, S  City COLUMBUS OH 43231  Amount of Each Disbursement this Peri  Category/ Type  Transaction ID: EXP.B.87261 Date of Disbursement  District:  Transaction ID: EXP.B.87261 Date of Disbursement  Og M / P2 9 / Y 2 0 1 0 Y  And In or Disbursement  Og M / P2 9 / Y 2 0 1 0 Y  And In or Disbursement  Og M / P2 9 / Y 2 0 1 0 Y  And In or Disbursement  Og M / P2 9 / Y 2 0 1 0 Y  And In or Disbursement  Og M / P2 9 / Y 2 0 1 0 Y  Date of Disbursement this Peri  Office Sought:  Og M / P2 9 / Y 2 0 1 0 Y  And In or Disbursement  Og M / P2 9 / Y 2 0 1 0 Y  Office Sought:  Office Sought: X House President Senate Primary Office Sought: X House President Senate Primary Office Sought: X House President Senate Primary Office Sought: X House President State: OH District: 12  SUBTOTAL of Disbursements This Page (optional)  District: 12		Office Sought: House Dis	Prima	ry			Тур	e .							
ALEXANDRIA  Purpose of Disbursement  Candidate Name LEADERSHIP PAC  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) TIBERI FOR CONGRESS  Mailing Address 2931 EAST DUBLIN GRANVILLE ROAD, S  City State Zip Code OH 43231  Purpose of Disbursement  Candidate Name PATRICK JOSEPH TIBERI  Office Sought: X House Senate Primary General Other (specify) ▼  State: District: 12  Transaction ID: EXP.B.87261 Date of Disbursement  M 9 M / 2 9 / 2 0 1 0 7  Y 2 0 1 0 7  Amount of Each Disbursement this Perion (last page this line number only)		PROSPERITY PAC	ST.						Date	of Dis	burse	ment			Y
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City State Zip Code OH 43231  Purpose of Disbursement  Candidate Name PATRICK JOSEPH TIBERI  Office Sought: X House Primary X General Other (specify) State: OH District: 12  SUBTOTAL of Disbursements This Page (optional)		,							Date	of Dis	burse	ment			
OH 43231  Purpose of Disbursement  Candidate Name PATRICK JOSEPH TIBERI  Office Sought:		Mailing Address 2931 EAST DUBLIN	N GRANVIL	LE RO	AD, S				0 9	M /	<sup>D</sup> 2	9 /	ž	0 1 0	Y
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	S		ional)					<u> </u>		-	•		1100	00.00	= =
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S	CHEDULE B (FEC Form 3X	/ I lica congrata conodula(c) I i T	R LINE NUMBER: PAGE 436 / 438
IT	EMIZED DISBURSEMENTS		eck only one)  21b
		, , , , , , , , , , , , , , , , , , , ,	person for the purpose of soliciting contributions be to solicit contributions from such committee
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	. POLITICAL ACTION COMMITTEE (a	a.k.a. Medco Health PAC)
	Full Name (Last, First, Middle Initial) WIN BACK AMERICA POLITICAL A  Mailing Address PO BOX 1131	CTION COMMITTEE	Transaction ID: EXP.B.87256 Date of Disbursement  O 9
	City ANDERSON Purpose of Disbursement	State Zip Code IN 46015	Amount of Each Disbursement this Period 2500.00
	Candidate Name LEADERSHIP PAC	011 Catego Type	pry/
	Office Sought:    House   D     Senate   President     State: District:	Disbursement For:  ☐ Primary ☐ General ☐ Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	•	2500.00
TOTAL This Period (last page this line number only)	<u> </u>	172000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page  FOR LINE (check on 21b 27	PAGE 437 / 438 ly one)  22
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 INC. POLITIONS INC.	ΓΙCAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) DEAL FOR GOVERNOR  Mailing Address P.O. BOX 2495		Transaction ID: EXP.B.85822 Date of Disbursement  O 9 O 3 O Y Y Y O Y O Y O Y O Y O Y O Y O Y
	State Zip Code GA 30503	Amount of Each Disbursement this Period 5000.00
Candidate Name NON-FEDERAL CONTRIBUTION	Category/ Type	
Office Sought: House Disburser Senate President State: GA District:	ment For: 2010 Primary X General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	<b></b>	5000.00

(Use separate schedule(s) **DEBTS AND OBLIGATIONS** for each numbered line) **Excluding Loans** 

PAGE 438 / 438 FOR LINE NUME (check only one)

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MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION COMMI	TTEE (a.k.a. Medco Health PAC)
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NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLIT	ICAL ACTION COMMITTEE (a.k.a. M	ledco Health PAC)
A. Full Name (Last, First, Middle Initial) of Debt NIELSEN, MERKSAMER, PARRINELLO		Nature of Debt (Purpose): LEGAL & ACCOUNTING SERVIC- ES
Mailing Address 1415 L STREET, STE. 12	200	
City State SACRAMENTO CA	ZIP Code 95814	
Outstanding Balance Beginning This Period		Transaction ID: PAY:D:85107
114.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	114.00	0.00
<b>B.</b> Full Name (Last, First, Middle Initial) of Debt NIELSEN, MERKSAMER, PARRINELLO		Nature of Debt (Purpose): LEGAL & ACCOUNTING SERVIC-ES
Mailing Address 1415 L STREET, STE. 12	200	
City State SACRAMENTO CA	ZIP Code 95814	
Outstanding Balance Beginning This Period		Transaction ID: PAY:D:85108
605.75		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	605.75	0.00
1) SUBTOTALS This Period This Page (optional)	)	0.00
1) SUBTOTALS This Period This Page (optional) 2) TOTALS This Period (last page this line number)		0.00
2) TOTALS This Period (last page this line number		